

## SRI VENKATESWARA COLLEGE OF NURSING

Recognized by the Govt. OF A.P & Indian Nursing Council, New Delhi Affiliated to Dr. NTR University of Health Sciences, Vijayawada, & Accredited by NAAC, Bengaluru with 'A' Grade.

RVS Nagar, Tirupathi Road, Chittoor – 517 127(A. P)

College Code: SVCC143 website: www.svconedu.org,

e-mail: svcon.rvs@gmail.com, principal.svcon@gmail.com, svson.rvs@gmail.com Mob: 7729999174, 7729999171

## **ADMISSION FORM**

Application	n No.			Branch					
01. Name of the Student (As per SSC Marks Memo in Block Letters)									
7					Attach Passport				
02. Name of the Father / Guardian									
03. Name of the Mother									
04. Date of Birth : (As per SSC Marks Memo)									
05. Gender: Female									
06. Nationality: Indian If others (specify)									
07. Religion : Hindu Muslim Christian Others									
08. Mother Tongue :									
09. Community: SC ST BC OC									
10. EDUCATIONAL DETAILS									
Course	Hall Ticket No.	Year of Pass	Name of the Institution	School / Board	Marks & Grade (or) %				
SSC			-						
Intermediate									
PG PG									
11. Personal Marks of Identification : a) (As given in SSC Certificate) b)  12. Blood Group :									
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13. FEE PARTICULARS										
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B. Sc. Nursing GNM M. Sc. Nursing SOURCE OF INFORMATION  How did you hear about SVCON? Tick [ ]  SVCON website SVCON Student Friends Press Advertisement Trade Fair/Exhibition Banners/Hoarding Direct Mailer Search Engineer SVCON Representative School Management Educational Consultant / Agent Please specify the Name  DECLARATION										
I hereby declare that all particulars stated in this application form are true to the best of my knowledge and belief. I hereby declare that all particulars stated in this application form are true to the best of my knowledge and belief. I have read and Understood all provisions of admission and agree to abide by them. In the event of submission of fraudulent, incorrect or untrue Information or suppression or distortion of any fact like educational qualification, marks, nationality etc., I understand that my Admission/degree is liable for cancellation. I further understand that my admission is purely provisional subject to the verification of the Eligibility conditions. I am also aware of the financial obligation of applying to and studying at this institution and I undertake to pay the Tuition and other fees payable to this institution and abide by all rules and regulations of the institution that are in force from time to time.										
Signature of the PARENT / GUARDIAN				_	ature of the PLICANT					
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