



Udupi College of Nursing

Opp. SIBM, Shivalli, Manipal- 576104, Karnataka
Ph: 0820-2570924, E-Mail: udupicollege@gmail.com
Website: www.udupicollegeofnursing.com



APPLICATION FORM

M.Sc. Nursing

B.Sc Nursing

P.C. B.Sc Nursing

Name: Mr./ Ms. _____

Father's Name: _____

Mother's Name: _____

Date of Birth: _____

Address for Correspondence: _____

Pin: _____

Telephone No: _____

Mobile No: _____

E-Mail: _____

ACADEMIC PARTICULARS

Exam Passed	Name of School / College	Name of Board / University	Class & % of Marks	Year of Passing
PUC/ 10+2				
Degree				

Date: _____

Signature of the Parent _____

Signature of the Student _____

Note: To confirm admission, please draw a DD for Rs: 10,000/- in favor of **Udupi College of Nursing** payable at **Udupi** and send through Registered Post.

Documents Required

1. SSLC / 10th Marks Card
2. PUC / 10+2 Marks Card
3. Transfer Certificate
4. Conduct Certificate
5. Migration Certificate (Non- Karnataka Students only)
6. 5 Passport size Photographs

Adarsha Hospital