



# ALL INDIA NURSING & PARAMEDICAL COUNCIL

NEW DELHI

## Admission Form

Institute Name ..... Date.....

Courses of admission.....

Name of candidate in English(Block letter).....

Father name.....

Mother name.....

Husband name.....

Date of birth.....

Address for correspondence.....

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Permanent address.....

.....

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Phone no.....

Email-id.....

Education qualification.....

If any other qualification.....

Medium of study (Hindi/English).....

Nationality..... Rural/Urban..... Married/Unmarried.....

Whether belongs to SC/ST/OBC etc. (If so attach certificate).....

I solemnly declare that the above facts are correct to the best my knowledge..

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### Rules & Regulations

1. Fees once paid is not refundable
2. the students can also pay fee by D.D/P.O. In favour of ISOA, payable at Lucknow
3. Any change in address should be communicated to the Institute office without delay
4. student joining the center shall have to abide by the rules and regulations from time to time and maintain decorum. In case of dispute, the decision of the Institute will be final
5. In case of legal dispute, the jurisdiction will be at Lucknow courts only.
6. Any harsh or abusive language used in the office or written in the letter may effect the admission of the candidate

### DECLARATION/UNDERTAKING BY THE CANDIDATE/PARENTS/GUARDIAN

I here by solemnly declare and undertakes as under

1. That the facts mentioned about are fully correct to the best of my knowledge and belief
2. That i am eligible for admission to the above courses according to min .and max .age for admission .
3. That the information given by me and enclosures submitted are fully correct .If anything is found to be false or what any fraudulent means have been used by me seeking admission I shall abide by the orders of the Council authorities without any reservation, whatsoever.
4. I shall abide by all the code of discipline during the course of my studies at the Council.
5. I am aware that the fees once paid shall not be refunded or adjusted under any condition whatsoever .
6. I/We have carefully gone through all the terms and condition of admission and the manager will have full right power to cancel my admission of any wrongful information .
7. I will be responsible of my ward during course .
8. Having verified the bona fides and the performance of the Council and fully satisfied, I am seeking admission into the Institute voluntarily. I shall abide by rules and regulation of the Council strictly. Ignorance of the same is not an excuse .
9. I shall be personally responsible for the payment of all his/har institute dues to the best of my knowledge the entries made by my ward are correct and in future I shall neither demand return of fee nor be authorized to file any case of law .,I solemnly declare that the about facts are correct to the best my knowledge

Signature of Parents/Guardian

Signature of Candidate