Rajiv Gandhi University of Health Sciences, Karnataka
4th 'T' Block Jayanagar, Bangalore – 560041
Website: www.rguhs.ac.in Phone: 080-26761933

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name		Dr. R. Manjunathaswamy	S. M. BADIGER
Designation		Chairman, BOS. Medical	Professor.
Address		Clinical (PG), RGUHS. Prof. of Paediatrics, Subbaiah Inst of Medical sciences, Shivamogga	Govt College of Nursing KMCRI Hubli.
Mobile No		9845504280	9480140860 / 7676211135
Email ID		somagudhimanju@gmail.com	sbreeg525@gmail.com

For the Academic Year : 2025-26. *Date of Inspection:* 9/05/2025

(Please Tick the Appropriate Boxes Below)

Type of Inspection:	1.Fresh Affiliation		4. Re-Inspection	
	2.Continuation of Affiliation	✓	5.Surprise Inspection	
	3.Enhancement of Seats	✓	6. Change of Name/Address	
	7. Additional Course (M.Sc Nursing) only.			

Nursing Programme Under Inspection:	1. Basic B.Sc. Nursing	✓	2. Post Basic B.Sc. Nursing	
	3. M.Sc. Nursing		4. M.Sc. NPCC	

1	Name of the Institution with Full Address	UNITY COLLEGE OF NURSING UNITY ACADEMY OF EDUCATION ASHOK NAGAR POST, SHEDIGURI, DAMBEL ROAD, MANGALORE – 575006, DAKSHINA KANNADA	2	Year of Establishment 1999
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary /Trust/Society ✓ /Company		
3	(a). Name of the Trust/Society & complete postal address	UNITY HEALTH AND CHARITABLE TRUST HIGHLANDS, PB NO. 535, KANKANADY, MANGALORE – 575002. (Enclose copy of Registration documents of Society/Trust) **Annexure – 1**		
		Email: info@unityhospital.in	Website: www.unityhospital.in	
	(b). Name of the Owner of Trust/Society	DR. C.P. HABEEB RAHMAN		

Signature of Chairman

Signature of Member (1)
Dr. R. Manjunathaswamy

Signature of Member (2)

4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : 7 (Enclose copy ofGoverning Council Members & Audit report of Society/Trust)		Annexure - 2
5	Details of Principal/Head of the institution	Name: DR. RAJA. A Qualification: Ph.D in NURSING Experience: 23 years Email: principal@unityeon.com	Mobile No: 9880747310 Office No: 0824-4281555 Fax No: 0824-2432691 Residential phone No: —	
6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☑	If yes, Specify the full name of the nursing institution with full addressVerify with the original TRUST document. (Verify& enclose a copy of the registered trust Documents) Annexure – 3

7. Affiliation Fee Paid Details:

Annexure - 4

Course Applied UG Courses	Enhancement of Seats Continuation / Fresh Affiliation	Particulars of fees paid for				
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UGor b) for UG and PG courses c) NPCC	Amount
B.Sc. Nursing	Application Fee Application Processing Fee Increase Intake					1,000/- 50/- 3,00,000/-
Post Basic B.Sc. Nursing						
					Total (A)	3,01,050.00/-

PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty	
	1.		
	2.		
	3.		
	4.		
	5.		
		Total (B)	
NPCC			
		Total (C)	
		Grand Total (A+B+C)	

Online Transaction Number or Details: ZHDFE30969920, dtd: 24/12/2024

Remarks:

Verify &Enclose copy of Affiliation fee paid documents

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

8. Approval Status of the Institution &Sanctioned Intake:

Name of the Course	Intake Approved and Admitted	GOK	RGUHS	KSNC	INC	Remarks
Basic B.Sc. Nursing	Approval Letter No. and Date	Aakuka515 MPS 2010, B'lore dated 27/7/2011 Annexure - 5	RGU/AFF/NSG/ COA/01/2024-25 Dtd. 20/09/2024 Annexure - 6	KNC/1201/ 2004, dtd. 11/11/2005 Annexure - 7	File No. IF-45/ 2000, dtd. 18/11/2024 Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60	60	
	Admissions Made for the Current Academic Year	60	60	60	60	
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					
	Admissions Made for the Current Academic Year		N.A			
a. b. M.Sc. Nursing in c. Community Health d. Medical Surg OBG e. Paediatric Psychiatry	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake		N.A			
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake		N.A			
	Admissions Made for the Current Academic Year					

9. Total No. of Students under Training in each of the Nursing Education Programme:

Programme	I year	II Year	III Year	IV Year	Total

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

B.ScNursing	Male		1			
	Female	60	59	59	60	
Post Basic B.Sc Nursing	Male					
	Female					
M.Sc Nursing	Male					
	Female					
M.Sc NPCC	Male					
	Female					

10. If the college has PBBSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

Annexure - 9

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From------ To----------
			N.A			

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

11. If the college has MSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

Annexure –10

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From------ To----------
			N.A			

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.
Ref: F.No.1-6/LT/2022-INC dtd 23.03.2022&RGU/ADM/CIR/01/2017-18 dtd 25.03.2017

Remarks:_____

_____

_____

12. Teaching Faculty Requirements for all Nursing Programs:

Sl. No	Designation	Required				Existing / Available				Deficit			
		B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)*	M.Sc NPC C	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	NPC C	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	M.Sc NPC C

Signature of Chairman Signature of Member (1) Signature of Member (2)

		40 to 60	61 to 100	20 to 60			40 to 60	61 to 100				40 to 60	61 to 100			
1	Principal	1	1					1								
2	Vice-Principal	1	1					1								
3	Professor	1	1-2		1*			2								
4	Associate Professor	2	2-4		1*			3								
5	Assistant Professor	3	3-8	2	3*			5								
6	Tutor	8-16	16-24	2-10	--			23								
	Total	**16-24**	**24-40**	**4-12**												

For Example: For **40 Students Intake** minimum number of teachers required is **16** including Principal, i.e., Principal - 01, Vice Principal – 01, Professor - 01, Associate Professor - 02, Assistant Professor - 03, and Tutors- 08

(The Faculty and Student Ratio is **1:10** and ***For M.Sc. Nursing**: Depends on Speciality offered and ratio remains same i.e., **1:10** if they offer B.Sc Nursing Programme)

Year Wise Distribution of Faculty for B.Sc Nursing :
(Start the Program i.e, for 1st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)

Intake	1st Year	2nd Year	3rd Year	4th Year
40 Students Intake	**Total 5 Faculty** • 3 M.Sc. Nursing qualified faculty • 2 Tutors	**Total 8 Faculty** • 5 M.Sc. Nursing qualified faculty • 3 Tutors	**Total 12 Faculty** • 7 M.Sc. Nursing qualified faculty • 5 Tutors	**Total 16 Faculty** • 8 M.Sc. Nursing qualified faculty • 8 Tutors
60 Students Intake	**Total 6 Faculty** • 3 M.Sc. Nursing qualified faculty • 3 Tutors	**Total 12 Faculty** • 5 M.Sc. Nursing qualified faculty • 7 Tutors	**Total 18 Faculty** • 7 M.Sc. Nursing qualified faculty • 11 Tutors	**Total 24 Faculty** • 8 M.Sc. Nursing qualified faculty • 16 Tutors
100 Students Intake	**Total 10 Faculty** • 5 M.Sc. Nursing qualified faculty • 5 Tutors	**Total 20 Faculty** • 8 M.Sc. Nursing qualified faculty • 12 Tutors	**Total 30 Faculty** • 12 M.Sc. Nursing qualified faculty • 18 Tutors	**Total 40 Faculty** • 16 M.Sc. Nursing qualified faculty • 24 Tutors

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

12.1. Teaching Faculty details :– Details should be written in format only

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience		Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG	After PG			
1.	Dr. Raja . A	Principal	Ph.D in Nursing	2013	38298	3 yrs	23 yrs	23-01-2014		
2.	Prof. G. Chithra	Vice Principal	M.Sc (N) Child Heath Nsg	2002	RRTMN 2009 1181 KAR	3 yrs	22 yrs	10-04-2008		
3.	Prof. Johnsy Sundari F. K	Professor	M.Sc (N) O.B.G Nsg	2003	TMN 2009 1306 KAR	2 yrs	20 yrs	05-07-2021		
4.	Mrs. Synthia D'souza	Asso. Professor	M.Sc (N) O.B.G Nsg.	2014	18381 No. 27769	2 yrs	13 yrs	13-07-2015		
5.	Mrs. Precilla Priya D'Souza	Professor	M.Sc (N) Community Heath Nsg	2012	14632	2 yrs	11 yrs	01-06-2022		
6.	Mrs. Priya Lolita Fernandes	Asso. Professor	M.Sc (N) Medical Surgical Nsg	2010	1477	3 yrs	10 yrs	23-11-2015		
7.	Ms. Renita Noronha	Asso. Professor	M.Sc (N) Medical Surgical Nsg	2017	63370	–	7 yrs	01-03-2025		
8.	Ms. Jenifer Deboral R	Asst. Professor	M.Sc (N) Psychiatric Nsg	2020	RRTMN 2024 11036 KAR	2 yrs	4 yrs	06-04-2024		
9.	Ms. Niranjani C	Asst. Professor	M.Sc (N) O.B.G Nsg	2024	177393	4 yrs	1 yr	08-01-2025		
10.	Ms. Sushmitha	Asst. Professor	M.Sc (N) Psychiatric Nsg	2024	95396	3 yrs	1 yr	19-03-2024		
11.	Mr. Nulakandan P	Asst. Professor	M.Sc (N) Medical Surgical Nsg	2023	RNM NO. 215720	1 yr	2 yrs	28-02-2025		
12.	Ms. Irene Crasta	Asst. Professor	M.Sc (N) Community Heath Nsg	2024	124339	1 yr	4 months	06-01-2025		
13.	Ms Slaney C Tauro	Nursing Tutor	B. Sc Nursing	2012	50598	7 yrs		16-07-2018		
14.	Mr. Abhijith S Nair	"	B. Sc Nursing	2022	136903	2 yrs		07-03-2023		
15.	Ms. Athira M A	"	B. Sc Nursing	2022	136906	2 yrs		01-03-2023		
16.	Ms. Reji Susan Thomas	"	B.Sc Nursing	2014	65401	10 yrs		02-02-2015		
17.	Ms. Cicilia C V	"	P.B. B Sc Nursing	2013	26971	9 yrs		03-06-2024		
18.	Mr. Arun Jose	"	P.B.B.Sc Nursing	2016	88341	6 yrs		19-04-2019		
19.	Ms Prajna K	"	B. Sc. Nursing	2021	124781	3 yrs		27-04-2022		Prajna k
20.	Ms. Meenu Arjunan	"	P.B. B.Sc. Nursing	2020	RRKPL 2019 15430 KAR	3 yrs		10-03-2022		
21.	Ms. Pooja Baligar	"	B. Sc Nursing	2021	125319	1 yr 8 months		06-09-2023		
22.	Ms. Juvara Mariya K	"	B. Sc Nursing	2020	108744	2 yrs		15-04-2024		

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

23.	Ms. Spandana	Nursing Tutor	P.B. B.Sc Nursing	2023	235194	2yrs		04-04-2023		
24.	Ms. Rashmitha T C	"	P.B.B.Sc Nursing	2023	235201	2yrs		11-04-2023		
25.	Ms. Harshitha M B	"	B.Sc Nursing	2023	153223	1yr 5months		01-12-2023		
26.	Ms. Jashmitha S	"	B.Sc. Nursing	2023	154020	1yr 5months		01-12-2023		
27.	Ms. Riya Joy	"	B.Sc. Nursing	2023	157627	1yr 5months		01-12-2023		
28.	Ms. Nissi Marium Thomas	"	B.Sc Nursing	2023	157944	1yr 5months		01-12-2023		
29.	Ms. Nandana Manoj	"	B.Sc. Nursing	2023	158350	1yr 5months		01-12-2023		
30.	Ms. Jomol Joy	"	B.Sc. Nursing	2023	154627	1yr 5months		01-12-2023		
31.	Ms. Renisha Fernandes	"	B.Sc. Nursing	2022	134148	1yr		28-05-2024		
32.	Mrs. Saniya Mary Sabu	"	B.Sc. Nursing	2023	147052	1yr		15-04-2024		
33.	Mr. L. Divanaik	"	B.Sc. Nursing	2023	156956	1yr 6months		02-11-2023		
34.	Mrs. Ashwini N E	"	B.Sc Nursing	2019	101019	3yrs 10months		07-05-2025		
35.	Ms Anjal Benny	"	B.Sc Nursing	2023	150131	1yr 5months		05-12-2023		
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Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

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- **Note :** Identity of faculty to be verified with Govt approved ID to be verified (Aadhar/ Voter Id /PAN card/Driving Licence). Principal cum Professor- Essential Qualification: M.Sc. (Nursing) Experience: M.Sc. (Nursing) having **total 15 years experience with M.Sc. (Nursing) out of which 10 years after M.Sc. (Nursing) in collegiate program**. Ph.D. (Nursing) is desirable For Msc Nursing and NPCC programme there should be full time Research Guides available which needs to be verified with the original Guideship letters.(Student Guide ratio to be verified as per norms of RGUHS)
- If required attach same extra pages.

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

13. Particular of External Teachers (Part time) -Attach a separate sheet with this proforma.**Annexure - 11**

Sl.No.	Name	Qualification	Subject	Number of Hours per Year	Remarks
				LIST ENCLOSED	

14. Physical Facilities :

14.1. College Building: **Annexure - 12**

S. No	Details	Required	Existing	Remarks
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft	50,621.05 Sq.ft	
	Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)/EC Copy/Rental Agreement registered copy			
2	**CLASSROOMS** Size of each classroom (sq ft) for 40 to 60 intakeB.Sc (N): 900 sq ft	**4 Class rooms** 900sq ft Each	1706.93Sq.ft – 1 No. 1199.53Sq.ft – 3 Nos	
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	–	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	–	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each	–	
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	385.35 Sq.ft	
	2. Vice-Principal Chamber	200	385.35 Sq.ft.	
	3. HOD	5 x 200 = 1000	1216 Sq.ft	
	4. Professor/Assoc. Prof	800+2400=3200	3200 Sq.ft.	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)	1	385.35 Sq.ft.	
	7. Accountants Office	1	385.35 Sq.ft.	
	8. Store Room	1	385.85 Sq.ft.	
	9. Record room	1	64.90 Sq.ft.	
	10. Room for maintenance staff	1	64.90 Sq.ft.	
	11. Xeroxing room	1	385.35 Sq.ft	
	12. common room	1000	1199.53 Sq.ft.	
	13. Seminar hall	3000	3023.30 Sq.ft.	
	14. Toilets	1000	1566.31 Sq.ft.	
	15. A.V/Aids room	600	791.36 Sq.ft	

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

S. No	Details	Required	Existing	Remarks
4	**LABORATORIES**			
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1607.80 Sq.ft 1200 Sq.ft.	
	Nutrition & Community Health Nursing	1200sq.ft	2399.06 Sq.ft	
	Obstetrics and Gynecology Laboratory	900sq.ft	1199.53 Sq.ft.	
	Pediatrics Nursing Laboratory	900sq.ft	1199.53 Sq.ft.	
	Pre-Clinical Sciences Laboratory	900sq.ft	1199.53 Sq.ft.	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1607.80 Sq.ft.	

Note:

- One large skill lab/simulation lab can be constructed consisting of the labs specified with a total of 5500 sq.ft.size or can have five separate labs in the college.
- At least 10-12 sets of all items needed. Simulators for advance skills e.g., administration of tube feeding, tracheostomy, gastrostomy, I/V injection, BLS, newborn resuscitation model, etc.
- The laboratory should have computers, internet connection, monitors and ventilator models/manikins/ simulators for use in Critical Care Units.
- For NPCC programme there should be Simulation lab with High fidelity Mannequins and task trainers available.
- Each classroom size-900sq for 40-60 student intake & proportionately the size of the built-up area will increase/decrease according to the number of seats approved.

Classrooms and Laboratories (Verify & attach a copy of Building Plan approved by competent authority with building completion certificate)

Building Documents: **Annexure – 12**

1. **Is the college building own or leased / rented?**
2. **Blue print of the building attested by competent authority.**
3. **Tax paid receipt (Latest / current year)**
4. **Occupancy certificate.**
5. **Sale deed / Lease deed of the building / Land.**

It is mandatory to enclose all the documents mentioned above.

Note:

- If the institution doesn't have own building even after 2016 withdrawal of affiliation will be initiated. .(F.NO.1-5/2014-INC dtd 29/10/2014).
- It is mandatory that **all nursing institution** shall have its own building within two years of its establishment **2021-22 onwards.**
- If one of the trustee/member/director of the Trust/Society/Company desires to lease the building owned by him for nursing program, it should be for a period of 30 years. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)
- Google location of college to be attached by LIC team.

15. Vehicle Details : Enclose a copy of RC Book / Insurance / Driving License **Annexure – 13**

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licience
4	DETAILS ENCLOSED		Yes / No	Yes / No	Yes / No

Signature of Chairman Signature of Member (1) Signature of Member (2)

16. Library facility : Enclose list of library books

Annexure - 14

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Remarks
Required 2300 Sq.Ft	2415.90 Sq ft	YES ☑ No ☐	✓	✓	

Total No. of Nursing Books available	3603	**No. of Nursing Journals subscribed**	10
No. of Thesis/Research titles available	1250	**Is internet facility available for Students?**	yes
No of e-books	105	**How many books were purchased in last financial year?**	173

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1.	Mrs Judy Chacko	M.Sc. Lib. Science	27 yrs.	
2.	Mrs. Bindu Naveen	M.Sc. Lib. Science.	19 yrs.	

Note : A minimum of 500 of different subject titled nursing books (all new editions), in the multiple of editions, total of minimum 3000 books for all batches; 3 kinds of nursing journals, 3 kinds of magazines, 2 kinds of newspapers and other kinds of current health related literature should be available in the library (for 40-60 intake)& proportionately number of titles of books and journals willincrease/decrease according to the number of seats approved.

17. Academic activities : Enclose the details of past 3 years

Annexure - 15

Academic activities	Particulars	Remarks
Research Projects	DETAILS ENCLOSED	
Conferences conducted		
Conferences attended		

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

18. Details of Clinical / Hospital Facilities :

Annexure - 16

1	Do you have parent Medical College?	YES ☐	NO ☑
2	Do you have parent hospital?	YES ☑	NO ☐
	If Yes, Hospital Owned by	i. Trust/Society/~~Missionary~~ ☑	
		ii. Trust member with MOU ☐	

Parent Hospital.		Total No. Beds	Distance from the college	Occupancy on the day of inspection (min 75%)	Remarks
Full Name & Address of the Parent Hospital UNITY HOSPITAL HIGHLANDS, PB NO 535, KANKANADY, MANGALORE-575006		300	6 Kmtrs.	90%	
NAME OF THE TRUST/ Person owning The Hospital UNITY HEALTH AND CHARITABLE TRUST					
Name Of The Owner Of The Trust of Hospital DR. C. P. HABEEB RAHMAN CHAIRMAN					
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 GOVT WENLOCK DISTRICT HOSPITAL, MANGALORE,	150(Paed.)	5 Kmtrs.	92%	
	2. GOVT. LADY GOSCHEN HOSPITAL, MANGALORE	272	5 Kmtrs.	97%	
	3. FR. MULLER MEDICAL COLLEGE HOSPITAL, MANGALORE.	209	6 Kmtrs.	95%	
	4. KMC HOSPITAL, MANGALORE.	320	5 Kmtrs.	98%	

(Mention the number of beds, verify the original documents of proof regarding the ownership of hospital and the number of beds with KPMEA and Pollution control board certificate, also verify the details in online website of KSPCB & KPMEA notifying the same).

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC).
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central /state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable.Other specialties/facilities for clinical experience required are;-OT, Eye/ENT, Burns &Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, ICU/ICCU. (Reference :F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd 20/04/2018).
- With effect from 2022-23 AY, Nursing colleges **for Bangalore Urban and Mangalore city should have 200 bedded Unitary/Single allopathic parent/own hospital.** This hospital should continue to function as parent hospital' till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority,

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

[Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)

- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/ agencies / institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)

Note

- Verify the original KPMEA documents, pollution control certificate of the hospitals to prove the ownership of the hospital and the number of beds
- Verify the MOU(undertaking) between trust member (owner of the hospital) and the trust [i.e., signed by all trustees/members/directors of Trust/Society/ Company].owning the nursing institution with the clause to the effect that the trustee/member/director of the Trust/Society/ Company would not allow the hospital to be treated Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years.

Verify &Attach Clinical permission letter, fee paid receipts.

Remarks:

18.1. Distribution of Beds

Clinical Areas	Parent	Affiliated

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	100	90%	100+150	90%
Surgery including OT	100	90%	100 + 150	90%
Obstetrics & Gynecology	50	85%	272	95%
Pediatrics,	25	80%	150	90%
Emergency Medicine	25	95%	25+10	95%
Psychiatry	-	-	209	90%

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	6	90%	25	90%
Minor OT	3	90%	15	85%
Dental, Otorhinolaryngology, Ophthalmology	10	85%	25	85%
Burns and Plastic	5	80%	20	80%
Neonatology care unit & Pediatrics	25	85%	150	80%
Communicable disease/ Respiratory medicine/TB & chest diseases	10	80%	50	90%
Dermatology	5	85%	25	85%
Cardiology	10	95%	30	90%
Oncology	20	90%	100	85%
Neurology/Neuro-surgery	20	95%	90	90 %
Nephrology/Urology	20	95%	50	90 %
ICU/ICCU	25	95%	25+25	90 %
Geriatric Medicine	10	90%	25	85%
Any other OBG / General Medicine / General Surgery	50 / 50 / 40	90% / 90% / 90%	272	90%

Note : 1:3 student patient ratio needed. Verify and attach details of previous month.

19	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	RURAL PRIMARY HEALTH CENTRE, KATIPALLA.

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

Adopted / Affiliated	AFFILIATED
Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	15 Kms.
b. Services Rendered by Health & Family Welfare Programmes	OPD SERVICE, IMMUNIZATION, FAMILY PLANNING
URBAN FEILD :	
a. Name of CHC / PHC / SC	URBAN PRIMARY HEALTH CENTRE, BEJAI
Adopted / Affiliated	AFFILIATED
Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	4 Kms.
b. Services Rendered by Health & Family Welfare Programmes	OPD SERVICE, IMMUNIZATION, FAMILY PLANNING.
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.	

20	**Master Rotation Plan : Annexure - 18**		
a.	Basic B.Sc. Nursing	**YES** ☑	**NO** ☐
b.	Post Basic B.Sc. Nursing	**YES** ☐	**NO** ☐
c.	M.Sc. Nursing	**YES** ☐	**NO** ☐
21	**Time Table available for all Nursing Programmes**		
a.	Basic B.Sc. Nursing	**YES** ☑	**NO** ☐
b.	Post Basic B.Sc. Nursing	**YES** ☐	**NO** ☐
c.	M.Sc. Nursing	**YES** ☐	**NO** ☐

22	**Records of Students :** Are the following students records are maintained well?		
a.	Admission record	**YES** ☑	**NO** ☐
b.	Daily Attendance Registers	**YES** ☑	**NO** ☐
c.	Health Records	**YES** ☑	**NO** ☐
d.	Clinical and field experience record	**YES** ☑	**NO** ☐
e.	Practical record books - procedure record	**YES** ☑	**NO** ☐
f.	Practical record books - Midwifery case book	**YES** ☑	**NO** ☐
g.	Leave record	**YES** ☑	**NO** ☐

h.	Extracurricular activities of students	**YES** ☑	**NO** ☐
i.	Cumulative record of each	**YES** ☑	**NO** ☐

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

	Course planning of each subject	YES ☑	NO ☐
k.	Rotation plans	YES ☑	NO ☐
l.	Committee Meetings	YES ☑	NO ☐
m.	Affiliation records	YES ☑	NO ☐
n.	Records of Stock	YES ☑	NO ☐
o.	Annual report of activities and achievements	YES ☑	NO ☐
p.	Staff development programmes	YES ☑	NO ☐
q.	Anti ragging committee	YES ☑	NO ☐
r.	Student welfare committee	YES ☑	NO ☐

23	Hostel Facilities :Annexure - 12		
a.	Whether the college is having a separate Hostel?	YES ☑	NO ☐
b.	Built-up area of the Hostel	Sq.ft 26,515.00 sq.ft.	
c.	Is the Hostel Owned or Rented/Leased?	Own ☐	Rented/Leased ☑
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☑	NO ☐
e.	Total No. of students in the hostel	Girls : 225	Boys : NIL
f.	Total No. of rooms	Girls : 65	Boys : NIL
g.	Water Supply	YES ☑	NO ☐
h.	Electricity Supply	YES ☑	NO ☐
i.	Is Facilities available for outdoor games and indoor games?	YES ☑	NO ☐
j.	Is Sick room available?	YES ☑	NO ☐
k.	Whether the hostel mess is available with	YES ☑	NO ☐
l.	Safe drinking water facilities	YES ☑	NO ☐

List of Annexures:

Annexure Numbers	Details	Submitted (Tick Mark)	
		Yes	NO

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

Annexure - 1	Details of Trust/ Society related documents		
Annexure - 2	Details of Governing Council, its meetings & Audit report of Trust		
Annexure - 3	Details of any other Nursing Institution under the same Trust		
Annexure - 4	Details of Affiliated fees paid receipts		
Annexure - 5	Approval Status : GOK Order		
Annexure - 6	Approval Status : RGUHS Notification (Last 3 Years) Approval		
Annexure - 7	Approval Status : KNC Notification		
Annexure - 8	Status : INC Notification		
Annexure - 9	List of Post Basic B.Sc. Nursing Students as per format		
Annexure - 10	List of M.Sc. Nursing Students as per format		
Annexure - 11	Details of External /Part time Teachers		
Annexure - 12	Physical Facilities : 1. College Building- Own /rent /lease MOU documents, Sale deed, current year tax paid receipt, sanctioned building plan by competent authority, occupancy certificate, building accessibility-lift/ Rampin working condition, 2. Laboratories 3. Building related documents 4. Hostel		
Annexure - 13	Vehicle Details : Bus		
Annexure - 14	Details of List of Library Books & others		
Annexure - 15	Academic Activities		
Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.		
Annexure - 17	Details of Community Health Nursing Posting Facilities		
Annexure - 18	Master Rotation plans and Time tables		
Annexure - 19	List of Teachers with their Declaration forms & necessary documents		
Annexure – 20	RGUHS approved guideship letters of M.Sc Nursing faculty each speciality wise		

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations: The LIC team visited Unity College of Nursing on 9/5/2025. the team made following observation.

- The college is managed by UNITY HEALTH CHARITABLE TRUST. and its Running the college in a own building.
- Physical facilities: The college permitted with an intake of 60 seats annually for BSc Nursing program. Currently Institution has four class room with 900sqft dimension along with smart board. also the 2 New class rooms of 1800sqft is available for further requirements. college has laboratory for Nursing Foundation, Community health Nursing, Nutrition, OBG pediatrics. Each lab is having required mannequins and Equipments with all advanced Skill Lab in the college.
- Library: It has 2415 Sqft building Room with 3603 Text books. the Infrastructure of library is present as per Regulation of university with ELINATE Automation & MLib librarian.
- Teaching faculties: there are 35 faculties in the college present on the day of Inspection out of which 12 MSc Nursing Qualified staff present.
- the Institution is having parent hospital unity hospital in 3km Visinity & 300 beds
- Institution is owing 2 Buses with drivers for Student transportation.

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at _____ which has applied for continuation of affiliation for the academic year 2025-26.

We have conducted LIC inspection of this college on _____ and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2025-26, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

The information recorded by us in the LIC reports is true and correct.

The LIC inspection report along with documents and soft copy is submitted to RGUHS.

Senate Member (Chairman)	A C Member (Member)	Subject Expert (Member)

Signature of Chairman | Signature of Member (1) | Signature of Member (2)

Instructions for reporting of Local inspections by RGUHS

1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.

2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which

   a. Team shall compulsorily visit the attached hospital and physically verify the bed strength and facilities provided along with the KPMEA & PCB Certificates.

   b. Team shall obtain an undertaking/affidavit from he hospital in the prescribed format.

3. Submission of softcopy of Video recording, geo tagged Photography during LIC inspection is mandatory.

4. The check list should have specific comments wherever applicable.

5. Report shall not use the words Adequate/Satisfactory/ available/sufficient etc. where the specific information is sought such as Area of the land/ Dimensions of class rooms/ number of teaching faculty/ number of class rooms/Laboratories /number of books etc. Such reports will be rejected directly without the approval.

6. All ORIGINAL documents mentioned in the checklist must be verified by the team before writing comments in the report.

7. After the verification of the original documents, photocopies of the same to be collected and the copies to be attested by the seal and signature of the Principal.

8. Original Land documents to be verified: Dishaank app may be used to verify the owner's details of the particular institution.

9. For any misleading / wrong information the whole LIC team shall be made responsible.

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

UNDERTAKING by Trust Management

We the Chairman/President/Secretary/Member of the trust _____ are submitting the affidavit toUniversity.

The trust _____ is running/managing the colleges 1. _____

2._____

3._____ since _____ years.

We confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge.

We confirm that the faculty in the college are employed for full time in the college.

We also confirm that the college is solely managed by the trust and is not leased/sub leased to any other trust/agency to manage the college.

We also confirm that the college is abiding to the norms of Apex body/RGUHS. As prescribed from time to time.

If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.

Affidavit enclosed

Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

UNDERTAKING

I/We, _____ is/are the Owners/MD/CEO/Board Members of the _____ hospital situated at _____.

This is to confirm that our hospital _____ is registered under KPMEA and PCB with _____ beds and the bonafide certificate has been attached.

This is to confirm that the hospital _____ is functioning as affiliated/parent/own hospital for _____ college.

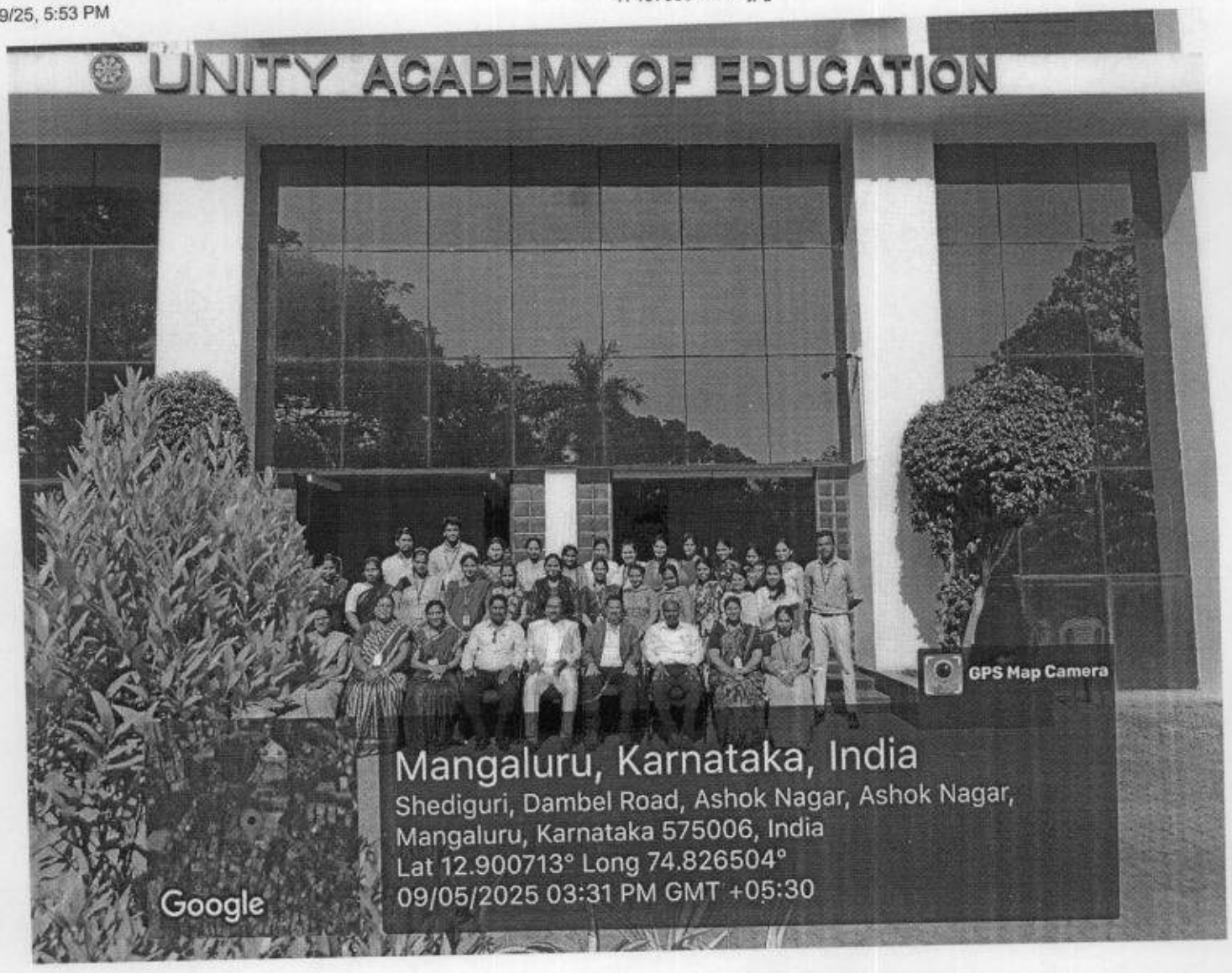
We also confirm that our hospital is solely affiliated to _____ college and is not affiliated to any other nursing college.

The information provided by us is true and correct.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)


UNITY ACADEMY OF EDUCATION
GPS Map Camera
Mangaluru, Karnataka, India
Shediguri, Dambel Road, Ashok Nagar, Ashok Nagar,
Mangaluru, Karnataka 575006, India
Lat 12.900713° Long 74.826504°
09/05/2025 03:31 PM GMT +05:30
Google

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Government of Karnataka

Rs. 100

e-Stamp

Certificate No.	:	IN-KA25563881569225X
Certificate Issued Date	:	08-May-2025 09:35 AM
Account Reference	:	NONACC (FI)/ kacrsfl08/ MULKI/ KA-DK
Unique Doc. Reference	:	SUBIN-KAKACRSFL0874826195495612X
Purchased by	:	CHAIRMAN UNITY HEALTH AND CHARITABLE TRUST
Description of Document	:	Article 4 Affidavit
Property Description	:	AFFIDAVIT
Consideration Price (Rs.)	:	0 (Zero)
First Party	:	CHAIRMAN UNITY HEALTH AND CHARITABLE TRUST
Second Party	:	THE REGISTRAR RGUHS BANGALORE
Stamp Duty Paid By	:	CHAIRMAN UNITY HEALTH AND CHARITABLE TRUST
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

सत्यमेव जयते

For ATHMASHAKTHI MULTIPURPOSE CO-OP. SOCIETY LTD.

Authorised Signatory

NOTARY GANGADHARA ULIVAL, LLB ADVOCATE & NOTARY LAW-KGK/167/2010 Expiry Date: 15-01-2026 GOVT OF KARNATAKA

Please write or type below this line

UNDERTAKING by Trust Management

I/We, the **Chairman**/President/Secretary/Member of the trust **Unity Health & Charitable Trust** are submitting the affidavit to University.

UNITY HEALTH & CHARITABLE TRUST

CHAIRMAN &

Managing Trustee

ERRORS/ CORRECTIONS ETC

Statutory Alert:

1. The authenticity of this Stamp certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

The trust **Unity Health and Charitable Trust** is running/managing the colleges

1. Unity College of Nursing, Unity Academy of Education

since 26 years

We confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge.

We confirm that the faculty in the college are employed for full time in the college.

We also confirm that the college is solely managed by the trust and is not leased/sub leased to any other trust/agency to manage the college.

We also confirm that the college is abiding to the norms of Apex body/RGUHS. As prescribed from time to time.

If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.

ERRORS/ CORRECTIONS ETC

NOTARY
GANGADHARA ULLAL, LLB
ADVOCATE & NOTARY
MANGALORE TALUK
LAW/LCI/167/2026
Expiry Date:
15-01-2028
GOVT. OF KARNATAKA

CHAIRMAN.
UNITY HEALTH & CHARITABLE TRUST
chairman &
Managing Trustee

NOTARIAL REGISTER No 1033 2025

GANGADHARA ULLAL, L
ADVOCATE & NOTAR
HAMILTON CIRCLE,
MANGALORE 575 001
KARNATAKA, INDIA
LAW/LCI/167/2026

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INDIA NON JUDICIAL

Government of Karnataka

Rs. 100

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Certificate No.	:	IN-KA25564581152411X
Certificate Issued Date	:	08-May-2025 09:37 AM
Account Reference	:	NONACC (FI)/ kacrsfl08/ MULKI/ KA-DK
Unique Doc. Reference	:	SUBIN-KAKACRSFL0874826620131170X
Purchased by	:	CHAIRMAN UNITY HOSPITAL
Description of Document	:	Article 4 Affidavit
Property Description	:	AFFIDAVIT
Consideration Price (Rs.)	:	0 (Zero)
First Party	:	CHAIRMAN UNITY HOSPITAL
Second Party	:	THE REGISTRAR RGUHS BANGALORE
Stamp Duty Paid By	:	CHAIRMAN UNITY HOSPITAL
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

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For ATHMASHAKTHI MULTIPURPOSE CO-OP. SOCIETY LTD.

Authorised Signatory

NOTARY
GANGADHARA UKKAL, LLB
ADVOCATE & NOTARY
MANGALORE TALUK
LAW-LCU-2020
Expiry Date: 31-01-2025
GOVT. OF KARNATAKA

Please write or type below this line

UNDERTAKING

I/We, the **Chairman** is/are **the Owner**/MD/CEO/Board Members of the **Unity hospital** situated at Highlands, P.B.No.535, Falnir Road, Kankanady, Mangalore.

Director
UNITY HOSPITAL
Unity Care & Health Services Pvt. Ltd.
Mangalore

ERRORS/ CORRECTIONS ETC

Statutory Alert:

1. The authenticity of this Stamp certificate should be verified at 'www.shcilestamp.com' or using e-Stamp Mobile App of Stock Holding. Any discrepancy in the details on this Certificate and as available on the website / Mobile App renders it invalid.
2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

UNITY HOSPITAL
Unity Care & Health Services Pvt. Ltd.
Mangalore

This is to confirm that our hospital **Unity Hospital** is registered under KPMEA and PCB with **300** beds and the bonafide certificate has been attached.

This is to confirm that the hospital **Unity Hospital** is functioning as affiliated/parent/own hospital for **Unity College of Nursing, Unity Academy of Education** college.

We also confirm that our hospital is solely affiliated to **Unity College of Nursing, Unity Academy of Education** college and is not affiliated to any other nursing college.

The information provided by us is true and correct.

CHAIRMAN/DIRECTOR.

Director
UNITY HOSPITAL
Unity Care & Health Services Pvt. Ltd.
Mangalore

NOTARY
GANGADHARA ULLAL, LLB
ADVOCATE & NOTARY
HAMILTON CIRCLE, MANGALORE TALUK
LAW/LCL/167/2020
Expiry Date: 15.01.2026
GOVT. OF KARNATAKA

ERRORS/ CORRECTIONS ETC

08.01.26

GANGADHARA ULLAL, LLB
ADVOCATE & NOTARY
HAMILTON CIRCLE,
MANGALORE 575 001
KARNATAKA, INDIA
LAW/LCL/167/2020

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