

Signature of Member (2)

	(b). Name of the Owner of Trust/Society	T. Prasad Rao		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	Details of Principal/Head of the institution	Name: Dr. Preetha Qualification: thomas Experience: 12 yrs. SC (N) NSQ Email: preethathomas@gmail.com	Mobile No: 8971873812 Office No: Fax No: 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 address Verify 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	Continuation / Fresh Affiliation	Particulars of fees paid for				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UGor b) for UG and PG courses c) NPCC	
B.Sc. Nursing	—	—	2.79,500/-	—	2.79,500	
Post Basic B.Sc. Nursing	—	—	—	—	—	
Total (A)					2,79,500/-	
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty				
	1. medical surgery	05				
	2. community health	05				
	3. obg.	05				
	4. pediatric	05				
	5. Psychiatry	05				
Total (B)						
NPCC	5					
Total (C)						
Grand Total (A+B+C)					279,500/-	
Online Transaction Number or Details: ZHMPQD09MMOC4 BD00000007591930 Affiliation Fees paid enclosed						

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Remarks:

Affiliation fees paid receipt Enclosed.

Verify & Enclose copy of Affiliation fee paid documents

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	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	Verified - <i>[Signature]</i>
	Affiliation Sanctioned Intake	60	60	60	40	
	Admissions Made for the Current Academic Year	60	—	—	—	
Post Basic B.Sc. Nursing	Approval Letter No. and Date	02/04/25 Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	Verified - <i>[Signature]</i>
	Sanctioned Intake	—	—	—	—	
	Admissions Made for the Current Academic Year	—	—	—	—	
M.Sc. Nursing in a. Community Health ☒ b. Medical Surgical ☒ c. OBG ☒ d. Paediatric ☒ e. Psychiatry ☒	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	Verified - <i>[Signature]</i>
	Sanctioned Intake	25	25	25	—	
	Admissions Made for the Current Academic Year	14				
M.Sc. NPCC	Approval Letter No. and Date	— Annexure - 5	— Annexure - 6	— Annexure - 7	— Annexure - 8	—
	Sanctioned Intake	IV —	V —	VI —	VII —	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	Admissions Made for the Current Academic Year					
--	---	--	--	--	--	--

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

Programme		I year	II Year	III Year	IV Year	Total
B.Sc Nursing	Male	31	24	27	20	102
	Female	29	22	28	40	109
Post Basic B.Sc Nursing	Male	—	—	—	—	0
	Female	—	—	—	—	0
M.Sc Nursing	Male	1	2			3
	Female	4	4			8
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-----
		→ NA ←				

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-----
		→ Enclosed ←				

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:

M.Sc Nursing Student's list enclosed.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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 NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	M.Sc NPCC
		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		1									
2	Vice-Principal	1	1		1		0									
3	Professor	1	1-2		1*		08									
4	Associate Professor	2	2-4		1*		04									
5	Assistant Professor	3	3-8	2	3*		01									
6	Tutor	8-16	16-24	2-10	--		15									
	Total	16-24	24-40	4-12			26									

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 1 st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)				
Intake	1 st Year	2 nd Year	3 rd Year	4 th 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.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										
12.										
13.										
14.										
15.										
16.										
17.										
18.										
19.										
20.										
21.										
22.										

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. Preettha Thomas	Principal	MSc (OBG)	2012	3421 KAR	3 Yrs	17/06/2022		
2.	Mrs. Lavanya. A	Professor	MSc (PED)	2009	1184	3 Yrs	26/06/2022		
3.	Mrs. Kalpana. Patil	Professor	MSc (MSN)	1999	6409	10 Yrs	07/02/2024		
4.	Mrs. Vimla. W	Professor	MSc (PGV)	2004	- 66	5 Yrs	05/02/2024		
5.	Mrs. N. Bainavi	Professor	MSc (OBG)	2011	987	1 Yr 4 Months	10/02/2024		
6.	Mrs. J. Gomathi	Professor	MSc (CHN)	2010	002192	2 Yrs	10/02/2024		
7.	Mrs. Tharani Juliet. V	Associate Professor	M.Sc	2014	4429	10 Yrs	02/11/2024		
8.	Mr. N. Durai	Assistant Professor	MSc (PED)	2020	85540	5 Yrs	01/11/2020		
9.	Ms. Christina. D	Assistant Professor	M.Sc (MSN)	2021	87231	3 Yrs	14/09/2022		
10.	Ms. Ahojiam Priya Devi	Lecturer	MSc (MSN)	2023	95823	1 Yrs	20/11/2023		
11.	Mr. Manak Chand Parichar	Tutor	BSc (N)	2017	088321	8 Yrs 1 Month	02/01/2017		
12.	Ms. Aishwarya. P	Tutor	BSc (N)	2021	121408	1 Yr 6 Months	14/01/2022		
13.	Ms. Soumya. K	Tutor	BSc (N)	2022	132105	2 Yrs 3 Months	21/12/2022		
14.	Ms. Sivaranjani M	Tutor	BSc (N)	2022	142374	1 Yr 10 Months	27/02/2023		
15.	Ms. Abishek MP	Tutor	BSc (N)	2023	158335	1 Yr 1 month	06/03/2024		
16.	Mr. Chinnadurai. S	Tutor	BSc (N)	2024	163703	10 Months	05/10/2024		
17.	Mr. Balachandrar	Tutor	BSc (N)	2024	163648	10 months	05/10/2024		
18.	Mr. Christy Benedict	Tutor	BSc (N)	2024	163078	Fresh	06/08/2025		
19.	Mr. Surendhiran. K	Tutor	BSc (N)	2024	164089	10 months	15/10/2024		
20.	Mr. Dinesh Kumar. K	Tutor	BSc (N)	2024	166707	8 months	23/12/2024		
21.	Mr. Raveen Kumar. S	Tutor	BSc (N)	2024	168295	4 months	02/04/2025		
22.	Baishakhi Dutta	Tutor	BSc (N)	2024	180984	5 months	11/02/2025		

Signature of Chairman

Signature of Member (P)

Signature of Member (M)

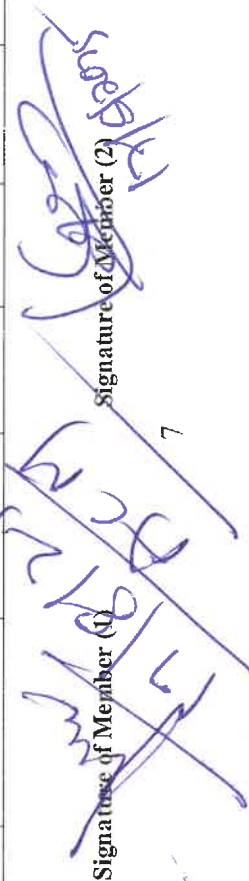
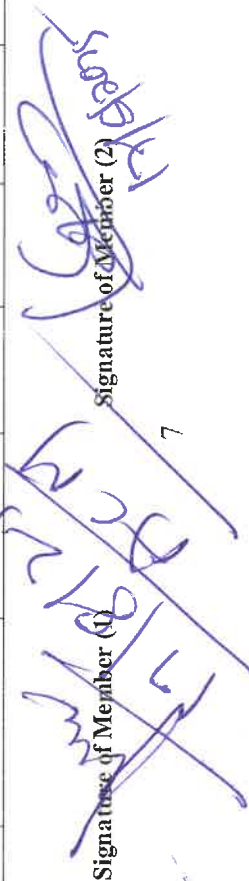
2017/10

✓

✓

23.	Sudhiti Halder	Tutor	Bsc(N)	2024	170200	4 months	-	15/04/2025	Sudhiti
24.	Sahil Sik	Tutor	Bsc(N)	2024	182350	6 days	-	05/08/2025	Sahil Sik
25.	J. Saranatha	Tutor	Bsc(N)	2017	20176532	2 Years	-	01/04/2022	J. Saranatha
26.									
27.									
28.									
29.									
30.									
31.									
32.									
33.									
34.									
35.									
36.									
37.									
38.									
39.									
40.									
41.									
42.									
43.									
44.									
45.									

Signature of Chairman


Signature of Member (1)

 Signature of Member (2)


8

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

Sl.No.	Name	Qualification	Subject	Number of Hours per Year	Remarks
—	—	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	26675 Sq. Ft	Verified
	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	4 x 900 sq ft	Verified
	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	2 x 900 sq ft	Verified
	NPCC : 600sq ft	2 Class rooms 600sq ft Each	—	—
3	Administrative Facilities			
	Office			
	1. Principal's Chamber	300	400 S/F	} Verified
	2. Vice-Principal Chamber	200	300 S/F	
	3. HOD	5 x 200 = 1000	1200 S/F	
	4. Professor/Assoc. Prof	800+2400=3200	3200 S/F	
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)	400	300 S/F	} Verified
	7. Accountants Office	200	300 S/F	
	8. Store Room	400	300 S/F	
	9. Record room	400	300 S/F	
	10. Room for maintenance staff	400	300 S/F	
	11. Xeroxing room	400	100 S/F	} Verified
	12. common room	1000	2000 S/F	
13. Seminar hall	3000	2000 S/F		
14. Toilets	1000	1200 S/F		
15. A.V/Aids room	600	600 S/F		

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	1600 S/F	} Verify
	Nutrition & Community Health Nursing	1200sq.ft	1200 S/F	
	Obstetrics and Gynecology Laboratory	900sq.ft	900 S/F	
	Pediatrics Nursing Laboratory	900sq.ft	900 S/F	
	Pre-Clinical Sciences Laboratory	900sq.ft	1200 S/F	
	Computer Lab (1: 5 computer :student)	1500sq.ft	2000 S/F	

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)

→ Enclosed ←

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, 2021 F.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 Licence
KA03D2254	KA03D2254	42	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	3000	YES ☒ No ☐	Yes	Yes.	Verified
Total No. of Nursing Books available	3000	No. of Nursing Journals subscribed		22	
No. of Thesis/Research titles available	105	Is internet facility available for Students?		Yes	
No of e-books	150	How many books were purchased in last financial year?		82	

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1.	Mr. Prithivi Reddy	B.Sc Lib	3 yrs	Verified
2.	Mrs. NAMATHA	10 th	2 yrs.	Verified

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 will increase/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	75	Verified
Conferences conducted	2	Verified
Conferences attended	5	Verified

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

18. Details of Clinical / Hospital Facilities :

Annexure - 16

XV

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 North Bangalore Hospital	50	1/2 km	98%	Verified
NAME OF THE TRUST/ Person owning The Hospital Dr. Lakshmi Pathy	—	—	—	—
Name Of The Owner Of The Trust of Hospital Dr. Lakshmi Pathy.	—	—	—	—
Affiliated hospitals- Full Name & Address of the Parent Hospital Own	1 Motherhood Hospital	20	1 km	Verified
	2 —	—	—	—

(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/CCU. (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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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, [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:

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical				
Surgery including OT				
Obstetrics & Gynecology				
Pediatrics,				
Emergency Medicine				
Psychiatry				

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT				
Minor OT				
Dental, Otorhinolaryngology, Ophthalmology				
Burns and Plastic				
Neonatology care unit				
Communicable disease/ Respiratory medicine/TB & chest diseases				
Dermatology				
Cardiology				
Oncology				
Neurology/Neuro-surgery				
Nephrology/Urology				
ICU/CCU				
Geriatric Medicine				
Any other				

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

Signature of Chairman
17/5

Signature of Member (1)
14
17/5/2015

Signature of Member (2)
17/5/2015

19	COMMUNITY HEALTH NURSING : Annexure - 17 XVII	
RURAL FILELD		
a. Name of CHC / PHC / SC	K. G. Halli	
Adopted / Affiliated	Affiliated	
Administrated by	State Govt. ☐ Municipal Corporation ☒ Private ☐	
Distance from the Nursing Institute	3 km	
b. Services Rendered by Health & Family Welfare Programmes	Vaccination, Deewy.	
URBAN FEILD :		
a. Name of CHC / PHC / SC	K. Narayana pura	
Adopted / Affiliated		
Administrated by	State Govt. ☐ Municipal Corporation ☒ Private ☐	
Distance from the Nursing Institute	5 km	
b. Services Rendered by Health & Family Welfare Programmes	Family welfare	
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.		

20	Master Rotation Plan : Annexure - 18 XVIII			
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 ☐	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

h.	Extracurricular activities of students	YES ☒	NO ☐
i.	Cumulative record of each	YES ☒	NO ☐
j.	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	
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 : 60	Boys : 47
f.	Total No. of rooms	Girls : 19	Boys : 14
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 ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

List of Annexures:

Annexure Numbers	Details	Submitted (Tick Mark)	
		Yes	NO
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		✓

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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	✓	

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: LIC inspection was conducted at RL Abhishek Rao College

of Nursing Bangalore. for continuation affiliation B.Sc (N) and

M.Sc (N) on 17/08/2025 observation on the date of inspection.

1. College:- was established in year 2005, total area of the college was 26675 Sq. ft. including 8 class rooms 5 laboratory like, nursing foundation, pre clinical, nutrition and community obs & paediatric computer Lab Aus Room, multi purpose with equipment instruments, charts models chemical are observed on the inspection.
2. Teaching Staff:- Full time principle is present on the day of inspection including 5 professor, 1 Associate professor, 2 Asst. professor, 1 lecturer, 15 tutors are shown out of which 2 Teachers are leave on the day of inspection.
3. Laboratory Lab:- Laboratory Lab 3000 books and 22 journals, 105 Rich titles, 150 E-books, with seating capacity of 60 students are observed on the day of inspection, with qualified laborian present.
4. Hospital:- parent hospital name north bangalore hospital with 50 beds and affiliated hospital name is mother hood hospital 20 beds providing all best clinical for the students Kpme, PCB, BMW certificate of observed on the day of inspection. Shishu hospital 30 bed
5. Transportation:- buss facilities with seating capacity of 52 students RC books, license are observed.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru – 560 041

UNDERTAKING by Trust Management

We the Chairman/President/Secretary/Member of the trust
T. Prasad Rao are
submitting the affidavit to University.

The trust R & L Abhishek Rao health care Trust is
running/managing the colleges 1. T. Prasad Rao
2. T. N. Murthy
3. _____ since
2006 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.



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು

RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU

4th T Block, Jayanagar, Bengaluru – 560 041

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.

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at R.L. Abishakrao College of Nursing, which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on 12/8/24 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/2024-25, dated: 11/12/2023, 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 the 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: Dishank 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)



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru – 560 041

UNDERTAKING

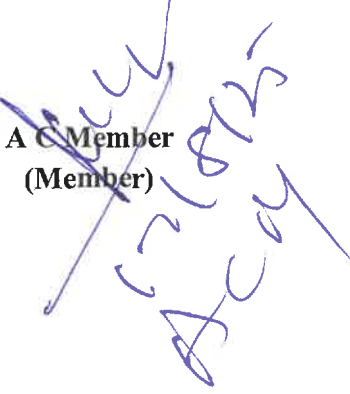
We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at _____ which has applied for continuation of affiliation for the academic year 2024-25.

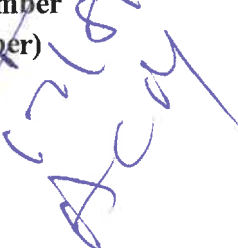
We have conducted LIC inspection of this college on _____ and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, 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)



सत्यमेव जयते

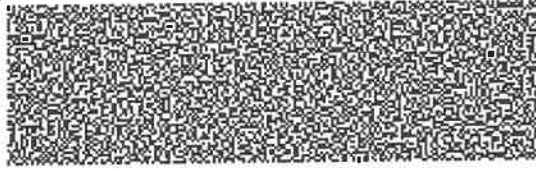
INDIA NON JUDICIAL

Government of Karnataka

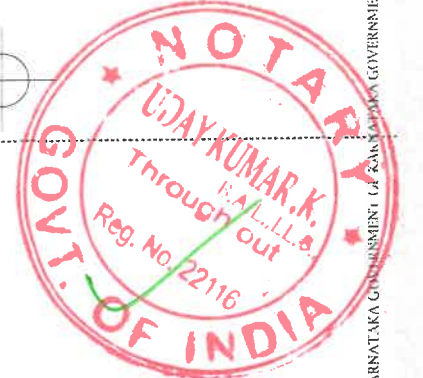
Rs. 100

e-Stamp

Certificate No.	: IN-KA20716195463668X
Certificate Issued Date	: 19-Aug-2025 10:39 AM
Account Reference	: NONACC (FI)/ kagcsl08/ BANASWADI5/ KA-SV
Unique Doc. Reference	: SUBIN-KAKAGCSL0855955720737827X
Purchased by	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Description of Document	: Article 4 Affidavit
Property Description	: UNDERTAKING
Consideration Price (Rs.)	: 0 (Zero)
First Party	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Second Party	: RGUHS JAYANAGAR
Stamp Duty Paid By	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Stamp Duty Amount(Rs.)	: 100 (One Hundred only)



Please write or type below this line



UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at RL ABHISHEK RAO COLLEGE NURSING BANGALORE Which has applied for continuation of affiliation for the academic year 2025-26.

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.

We have conducted LIC inspection of this college on 17/08/2025 and verified the infrastructure, Institutional facilities, Students Strength, Staff post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MRS) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, 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)



SWORN TO BEFORE ME
Kum
UDAY KUMAR.K.
B.A.L.,LL.B.,
ADVOCATE & NOTARY PUBLIC
GOVT OF INDIA Reg No 22116
No 15, 1st Main, 1st Cross
Chinnappa Layout, Kempapura,
BENGALURU-560 021

9 AUG 2025

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/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.


R & ABHISHEK RAO HEALTH CARE TRUST
No. 815, 4th B' Cross, 9th Main Road,
1st Block, HRBR Layout, Karyan Nagar
Bangalore - 560 043.



SWORN TO BEFORE ME


UDAY KUMAR .K.
B.A.L.L.U.D.,
ADVOCATE & NOTARY PUBLIC
GOVT OF INDIA Reg. No. 22116
No. 15, 1st Main, 1st Cross,
Chinnappa Layout, Kempapura,
BENGALURU-560 024

19 AUG 2025



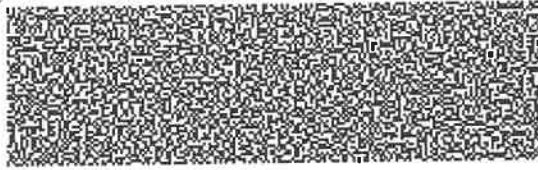
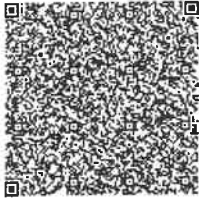
सत्यमेव जयते

INDIA NON JUDICIAL

Government of Karnataka

e-Stamp

Certificate No.	: IN-KA20693939329006X
Certificate Issued Date	: 19-Aug-2025 10:20 AM
Account Reference	: NONACC (FI)/ kagcs108/ BANASWADI5/ KA-SV
Unique Doc. Reference	: SUBIN-KAKAGCSL0855910697356112X
Purchased by	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Description of Document	: Article 4 Affidavit
Property Description	: HOSPITAL UNDERTAKING
Consideration Price (Rs.)	: 0 (Zero)
First Party	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Second Party	: MOTHERHOOD HOSPITAL A UNIT OF RHEA HEALTHCARE PVT LTD
Stamp Duty Paid By	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Stamp Duty Amount(Rs.)	: 100 (One Hundred only)



Please write or type below this line

UNDERTAKING

I/We, Mr. VIJAYATHNA V is /are the Owners/MD/CEO/Board Members of the MOTHERHOOD HOSPITAL A UNIT OF RHEA HEALTHCARE PRIVATE LIMITED hospital situated at NO.05, 914, Kalyan Nagar Bangalore-560043.

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.



This is to confirm that our hospital **MOTHERHOOD HOSPITAL A UNIT OF RHEA HEALTHCARE PRIVATE LIMITED** is registered under KPMEA and PCB with **20** beds and the bonafide certificate has been attached.

This is to confirm that the hospital **MOTHERHOOD HOSPITAL A UNIT OF RHEA HEALTHCARE PRIVATE LIMITED** is functioning as affiliated/parents/own hospital for **RL ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR, BANGALORE-560043** College.

We also confirm that our hospital is solely affiliated to **RL ABHISHEK RAO COLLEGE OF NURSING** College and is not affiliated to any other nursing colleges.

The information provided by us is true and correct.

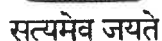

MOTHERHOOD HOSPITAL
No. 5 AC, 914, 1st Block,
Kalyan Nagar, HRBR Layout,
Bangalore-560043



SWORN TO BEFORE ME


UDAY KUMAR .K.
ADVOCATE & NOTARY PUBLIC
GOVT OF INDIA Reg. No. 22116
No 15, 1st Main, 1st Cross,
Chinnappa Layout, Kempapura.
BENGALURU-560 024

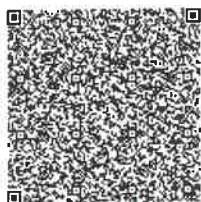
19 AUG 2025



Government of Karnataka

e-Stamp

Certificate No.	: IN-KA20703698316483X
Certificate Issued Date	: 19-Aug-2025 10:29 AM
Account Reference	: NONACC (FI)/ kagcsl08/ BANASWADI5/ KA-SV
Unique Doc. Reference	: SUBIN-KAKAGCSL0855929266694349X
Purchased by	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Description of Document	: Article 4 Affidavit
Property Description	: HOSPITAL UNDERTAKING
Consideration Price (Rs.)	: 0 (Zero)
First Party	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Second Party	: NORTH BANGALORE HOSPITAL KALYAN NAGAR
Stamp Duty Paid By	: R L ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR
Stamp Duty Amount(Rs.)	: 100 (One Hundred only)



Please write or type below this line



I/We, Dr. R.LAKSHMIPATHY is /are the Owners/MD/CEO/Board Members of the NORTH BANGALORE HOSPITAL hospital situated at 125/1 125/2 Chelikere Village Kalyan Nagar Bangalore-560043.

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.

This is to confirm that our hospital NORTH BANGALORE HOSPITAL is registered under KPMEA and PCB with 50 beds and the bonafide certificate has been attached.

This is to confirm that the hospital NORTH BANGALORE HOSPITAL is functioning as affiliated/parents/own hospital for RL ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR, BANGALORE-560043 College.

We also confirm that our hospital is solely affiliated to RL ABHISHEK RAO COLLEGE OF NURSING College and is not affiliated to any other nursing colleges.

The information provided by us is true and correct.


NORTH BANGALORE HOSPITAL
No. 125/1, 125/2, SY No. 104,
Chelikere, Kalyan Nagar Post,
Bangalore-560 043



SWORN TO BEFORE ME

UDAY KUMAR .K.
B.A.L.L.B.,
ADVOCATE & NOTARY PUBLIC
GOVT OF INDIA Reg No 22116
No 15, 1st Main, 1st Cross,
Chinnappa Layout, Kempapura,
BENGALURU-560 024

19 AUG 2025

This is to confirm that our hospital SHISHUKA HEALTHCARE PVT LTD is registered under KPMEA and PCB with 30 beds and the bonafide certificate has been attached.

This is to confirm that the hospital SHISHUKA HEALTHCARE PVT LTD functioning as affiliated/parents/own hospital for RL ABHISHEK RAO COLLEGE OF NURSING KALYAN NAGAR, BANGALORE-560043 college.

We also confirm that our hospital is solely affiliated to RL ABHISHEK RAO COLLEGE OF NURSING College and is not affiliated to any other nursing colleges.

The information provided by us is true and correct.


SHISHUKA HEALTHCARE PRIVATE LIMITED
938, Outer Ring Road, Kalyan Nagar,
HRBR Layout, Bangalore-560043



SWORN TO BEFORE ME



UDAY KUMAR .K.
B.A., LL.B.,
ADVOCATE & NOTARY PUBLIC
GOVT OF INDIA Reg No 22116
No. 15, 1st Main, 1st Cross,
Chinnappa Layout, Kempapura,
BENGALURU-560 024

19 AUG 2025



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru - 560 041

UNDERTAKING

I/We, DR. BHARATH KUMAR REDDY
is/are the Owners/MD/CEO/Board Members of the
SHISHUKA HEALTHCARE PRIVATE LIMITED hospital situated at
938 Outer Ring Road Kalyan Nagar HRBR Layout
Bangalore - 560043

This is to confirm that our hospital SHISHUKA HEALTHCARE PVT Ltd.
is registered under KPMEA and PCB with 30 beds and the bonafide certificate has
been attached.

This is to confirm that the hospital SHISHUKA HEALTHCARE PVT Ltd is
functioning as affiliated/parent/own hospital for RL ABHISHEK RAO COLLEGE OF
college. NURSING

We also confirm that our hospital is solely affiliated to
RL ABHISHEK RAO COLLEGE OF NURSING college and is not
affiliated to any other nursing college.

The information provided by us is true and correct.


SHISHUKA HEALTHCARE PRIVATE LIMITED
938, Outer Ring Road, Kalyan Nagar,
HRBR Layout, Bangalore-560043

SHISHUKA HEALTHCARE PRIVATE LIMITED
338 Outer Ring Road, Kovan Nagar,
HBB Layout, Bangalore 560043



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru - 560 041

UNDERTAKING

I/We, Mr. Vijayathuna. V.
is/are the Owners/MD/CEO/Board Members of the Motherhood Hospital Unit of Rhea Healthcare Pvt Ltd
hospital situated at No. 05, 914, Kalyan Nagar Bangalore - 560043

This is to confirm that our hospital Motherhood Hospital Unit of Rhea Healthcare Pvt Ltd
is registered under KPMEA and PCB with 20 beds and the bonafide certificate has
been attached.

This is to confirm that the hospital Motherhood Hospital is
functioning as affiliated/parent/own hospital for RL Ashishkumar College of Nursing
college.

We also confirm that our hospital is solely affiliated to RL Ashishkumar College of Nursing college and is not
affiliated to any other nursing college.

The information provided by us is true and correct.


MOTHERHOOD HOSPITAL
No. 5 AC, 914, 1st Block,
Kalyan Nagar, HRBR Layout,
Bangalore-560043

MOTHERHOOD HOSPITAL
No. 2 AC, 914 1st Block,
Kalyan Nagar, HRBB Layout,
Bangalore-560043



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
RAJIV GANDHI UNIVERSITY OF HEALTH SCIENCES, KARNATAKA, BENGALURU
4th T Block, Jayanagar, Bengaluru - 560 041

UNDERTAKING

I/We, DR. R. LAKSHMIPATHY.
is/are the Owners/MD/CEO/Board Members of the
NORTH BANGALORE HOSPITAL hospital situated at
125/1, 125/2 CHELIKERE VILLAGE KALYAN NAGAR POST
BANGALORE - 560042

This is to confirm that our hospital NORTH BANGALORE HOSPITAL
is registered under KPMEA and PCB with 50 beds and the bonafide certificate has
been attached.

This is to confirm that the hospital NORTH BANGALORE HOSPITAL is
functioning as affiliated/parent/own hospital for RL ABHISHEK RAO COLLEGE
college. OF NURSING

We also confirm that our hospital is solely affiliated to
RL ABHISHEK RAO COLLEGE OF NURSING college and is not
affiliated to any other nursing college.

The information provided by us is true and correct.


NORTH BANGALORE HOSPITAL
No. 125/1, 125/2, Sy No. 104,
Chelikeri, Kalyan Nagar Post,
Bangalore-560 043

NORTH BANGALORE HOSPITAL
1st FLOOR, 1st ST, 1st No. 104,
Chellur, Kalyan Nagar Post,
Bangalore-560 043

R L ABHISHEK RAO COLLEGE OF NURSING
(Affiliated to Rajaraja University of Health Sciences & Research by Govt. Karnataka)
No. 160/A, Chelakere Main Rd, Chelakere, Kalyan Nagar Post, Bengaluru - 560 043



Bengaluru, Karnataka, India

160, Chelakere Main Rd, Chelikere, 1st Block, Meganahalli, Kalyan Nagar, Bengaluru,
Karnataka 560043, India
Lat 13.028316° Long 77.639948°
17/08/2025 11:07 AM GMT +05:30





Bengaluru, Karnataka, India

160, Chelekere Main Rd, Chellikere, 1st Block, Meganahalli, Kalyan Nagar, Bengaluru, Karnataka 560043, India

Lat 13.028318° Long 77.639944°

17/08/2025 11:07 AM GMT +05:30





ACA/DCD/PGT-NUR/RLARCON/22/2023-24

Date: 01/04/2024

To

The Principal,
RL Abhishek Rao College of Nursing,
No. 815, 4th B Cross, 9th Main Road,
1st Block, HRBR Layout, Kalyan Nagar,
Bangalore - 560 043.

Sir,

Sub: - Transfer of PG teacher to guide the dissertation work of MSc (N) students.
Ref: - RL/CON/251 & 252/2024-25, Dated: 18/03/2024.

As per the documents submitted by the teachers and endorsed by the Principal of the Institute, the following teachers are recognized by Rajiv Gandhi University of Health Sciences as Post Graduate teachers, in the previous institution as mentioned below. Following their appointment at RL Abhishek Rao College of Nursing, Bangalore. They are permitted to guide the dissertation work of M.Sc Nursing Students in their concerned subject speciality in the present institution from April-2024 onwards as per RGUHS and INC regulations, as amended from time to time.

Sl. No.	Name of the teacher Designation & Department	Previous Institution	Present Institution
1.	Mrs. Janahidevi V Associate Professor of Paediatric Nursing	Bangalore City College of Nursing, Bangalore	RL Abhishek Rao College of Nursing, Bangalore
2.	Mrs. Vimala W Professor of Psychiatric Nursing		
3.	Mrs. Kalpana Patil Professor of Medical Surgical Nursing		
4.	Mrs. J Gomathi Assistant Professor of Community Health Nursing		
5.	Mrs. Bhairavi N Assistant Professor of OBG Nursing		

Any change of designation/Institution should be brought to the notice of the University immediately to enable updating of the status of the guide.

Copy to:

1. PA to Registrar (Eval)
2. Deputy Registrar, Affiliation Section
3. Guard File.

[Signature]
15/4
DIRECTOR
Director, Dept. of Curriculum Development
Rajiv Gandhi University of Health Sciences, Karnataka
4th 'T' Block, Jayanagar, Bangalore-560 041

