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

72

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. UMMED RAM	Dr. Prashant Kulkarni	NAGABHUSHANA. G
Designation	PRINCIPAL CUM PROFESSOR	Professor	Asst. Professor
Address	NOR COLLEGE OF NSG BANGALORE	B.V.V.S Sajjalashree SNS Nayanagar Bengaluru	Sunflower College of Nursing, Nelamangala Bangalore
Mobile No	9448089578	9591085481	8497808888
Email ID	ramummed@gmail.com	prasharamar@gmail.com	Nagathyla88@gmail.com

For the Academic Year : 2025 - 2026			*Date of Inspection:* 29/5/2025	
(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	SNS COLLEGE OF NURSING MYSORE ROAD, GUNDLUPET - 571111 CHAMARAJANAGARA (DIST) KARNATAKA	2	Year of Establishment: 2008
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary / Trust/Society /Company TRUST		
3	(a). Name of the Trust/Society & complete postal address	SRI NIRVANESWARA CHARITABLE TRUST (R) SRI DEGULA MUTH CAMPUS, KANAKAPURA - 562117 RAMANAGARA (DIST), KARNATAKA (Enclose copy of Registration documents of Society/Trust) Annexure – 1		
		Email: sns571111@gmail.com	Website: www.sns.org	

Signature of Chairman: Ummed Ram — UMMED RAM

Signature of Member (1): Prashant Kulkarni

Signature of Member (2): NAGABHUSHANA. G

	(b). Name of the Owner of Trust/Society	DR. SRI SRI MUMMADI NIRVANA MAHASWAMIJI		
4	Governing Council& Audit Report of Trust	**Total Number of Members in Governing Council :** 12 (Enclose copy ofGoverning Council Members & Audit report of Society/Trust) **Annexure -** 02 2		
5	Details of Principal/Head of the institution	**Name:** DR. MAHESHA P **Qualification:** MSc (N), PhD **Experience:** 13 years **Email:** mm571313@gmail.com	**Mobile No:** 9243580274 **Office No:** 8128144300 **Fax No:** **Residential phone No:** 7019340969	
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 –** 03 3

7. Affiliation Fee Paid Details:

Annexure - 4

Course Applied UG Courses	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	CONTINUATION AFFILIATION		195050	1000	25000	221050
Post Basic B.Sc. Nursing	CONTINUATION AFFILIATION		195050	1000	–	196050
					Total (A)	417100
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation			No of Seats X Prescribed fees of each faculty		
	1. MEDICAL-SURGICAL NURSING			05		51050
	2. OBG NURSING			05		
	3. PAEDIATRIC NURSING			05		
	4. COMMUNITY HEALTH NURSING			05		
	5. PSYCHIATRIC NURSING			05		
	HELINET + APPLICATION				Total (B)	51050
NPCC	FRESH AFFILIATION					51050
					Total (C)	51050
					Grand Total (A+B+C)	519200/-

Online Transaction Number or Details: 2BBC5CY09GG5K0, 2BBCGBE09GH0F4, 2BBC01809GH0RH, 2BBCH6E09GN23T

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

1. BSc (N) INCREASE OF INTAKE :- 301050/- (2BBCQDD09PGM2)
2. MSc (N) 3 SPECIALITY INCREASE OF INTAKE - 226050/- (2BBCOKQ09PHDEK)

Remarks: COPY 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	Aakuka218 MPS2010 Bangalore dated 10.05.2010 Annexure - 5	RGU/AFF/NSG/COA/01/2024-25 Annexure - 6	KSNC/1157/2024-25 Annexure - 7	File No: 18-15/10827 dated 18/09/2024 Annexure - 8	COPY ENCLOSED
	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	Aakuka218 MPS2010 Bangalore dated 10.05.2010 Annexure - 5	RGU/AFF/NSG/COA/01/2024-25 Annexure - 6	KSNC/1157/2024-25 Annexure - 7	File No: 18-15/10827 dated 18/09/2024 Annexure - 8	COPY ENCLOSED
	Sanctioned Intake	60	60	60		
	Admissions Made for the Current Academic Year	60	60	60		
M.Sc. Nursing in a. Community Health ☑ b. Medical Surgical ☑ c. OBG ☑ d. Paediatric ☑ e. Psychiatry ☑ 05 X 05	Approval Letter No. and Date	Aakuka175 MPS2019 Bangalore dated 26.09.2019 Annexure - 5	RGU/AFF/NSG/COA/01/2024-25 Annexure - 6	KSNC/1157/2024-25 Annexure - 7	File No: 18-15/10827 dated 18/09/2024 Annexure - 8	COPY ENCLOSED
	Sanctioned Intake	25	25	25		
	Admissions Made for the Current Academic Year	25	25	25		
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	

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

	Sanctioned Intake					
	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
B.ScNursing	Male	21	15	22	27	85
	Female	39	45	38	33	155
Post Basic B.Sc Nursing	Male	06	07			13
	Female	54	53			107
M.Sc Nursing	Male	02	05			07
	Female	13	04			17
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——
	— COPY ENCLOSED —					

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——
	— COPY 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:_____

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				01									
2	Vice-Principal	1	1				01									
3	Professor	1	1-2		1*		02									
4	Associate Professor	2	2-4		1*		03									
5	Assistant Professor	3	3-8	2	3*		04									
6	Tutor	8-16	16-24	2-10	--		55									
	Total	**16-24**	**24-40**	**4-12**			66									

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

Vinnod Kam
Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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. Mahesha P	Principal	MSc Ph.d community	2013	6102	04	14	13.05.2013		
2.	Swetha BP	professor	MSc child Health	2011	9762	02	13	02.05.2013		Swetha
3.	Tojin V George	Asst. Prof	MSc Child Health	2020	65580	03	03	10.11.2021		
4.	Roja N	Lecturer	MSc Child Health	2021	80907	03	02	24.10.2022		
5.	Supreetha S	Asst. Prof	MSc OBG	2017	63249	04	04	22.06.2023		
6.	Prathap S	Asst. Prof	MSc OBG	2020	116357	-	05	20.06.2023		S-prathap
7.	Sharon priyanka S	Asst. Prof	MSc MSN	2020	73489	03	05	27.09.2024		
8.	Baidehi Jha	Lecturer	MSc OBG	2023	088567	03	01	27.09.2024		Bonja
9.	Swathi H S	Lecturer	MSc OBG	2024	125085	03	01	11.03.2025		
10.	Madhulatha	Lecturer	MSc OBG	2024	123780	03	01	05.06.2025		
11.	Saranya Babu	Lecturer	MSc MSN	2024	97647	05	01	11.03.2025		
12.	Madhu H S	Asst. Lec.	BSc	2021	129976	03	-	13.10.2021		
13.	Megha M	Asst. Lec.	BSc	2021	122473	04	-	24.05.2022		
14.	Anjali M	Asst. Lec.	BSc	2022	134244	02	-	02.01.2023		
15.	Krishnendu Biju	Asst. Lec.	BSc	2022	134274	02	-	02.01.2023		
16.	Aswathy VA	Asst. Lec.	BSc	2022	134263	02	-	02.01.2023		
17.	Bincy S	Asst. Lec.	BSc	2022	134264	02	-	02.01.2023		
18.	Ashamol OK	Asst. Lec.	BSc	2022	134249	02	-	02.01.2023		
19.	Athulya VM	Asst. Lec.	BSc	2022	134255	02	-	02.01.2023		
20.	Hrithik V	Asst. Lec.	BSc	2022	134251	02	-	02.01.2023		
21.	Drakshayini R	Asst. Lec.	BSc	2022	134258	02	-	02.01.2023		Drakshayini R
22.	Athira R	Asst. Lec.	BSc	2022	134262	02	-	02.01.2023		Athira R

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

23.	Anila Sabu	Asst. Lec.	BSc	2022	134255	02	-	02.01.23		Anila
24.	Arya A B	Asst. Lec.	BSc	2022	134269	02	-	02.01.23		Arya
25.	Sneha CS	Asst. Lec.	BSc	2022	134254	02	-	02.01.23		Sneha
26.	Youhais V	Asst. Lec.	BSc	2022	134261	02	-	02.01.23		Youhais
27.	Arathi A V	Asst. Lec.	BSc	2022	134274	02	-	02.01.23		Arathi
28.	Nisari V	Asst. Lec.	BSc	2022	134257	02	-	02.01.23		Nisari
29.	Sreekutty K R	Asst. Lec.	BSc	2022	134273	02	-	02.01.23		Sreekutty
30.	Prathapa C	Asst. Lec.	PBBSc	2022	1342	03	-	19.06.23		Prathap
31.	Girishkumar V L	Asst. Lec.	PBBSc	2023	144174	01	-	20.06.23		Girish
32.	Vasanthakumar R R	Asst. Lec.	BSc	2021	144743	02	-	20.06.23		Vasanth
33.	Linda M	Asst. Lec.	BSc	2021	127276	02	-	02.06.23		Linda
34.	Darshan H R	Asst. Lec.	BSc	2022	134270	02	-	02.01.23		[illegible]
35.	Subhasis Bhanja	Tutor	BSc	2024	157881	01	-	02.11.23		[illegible]
36.	Athila K V	Tutor	BSc	2024	157878	01	-	02.11.23		Athila. K V
37.	Sharavendra Murthy R	Tutor	BSc	2024	157893	01	-	02.11.23		[illegible]
38.	Jyothi K R	Tutor	BSc	2024	157884	01	-	02.11.23		Jyothi
39.	Dinesh Babu	Tutor	BSc	2024	157872	01	-	02.11.23		Dinesh
40.	Athira Ani	Tutor	BSc	2024	157874	01	-	02.11.23		Athira
41.	Subham Koley	Tutor	BSc	2024	158200	01	-	02.11.23		Subham
42.	Pramod BJ	Tutor	BSc	2024	157891	01	-	02.11.23		Pramod
43.	Aswathy Vinod	Tutor	BSc	2024	157892	01	-	02.11.23		Aswathy
44.	Kiran M	Tutor	BSc	2024	157886	01	-	02.11.23		Kiran
45.	Bhagyalakshmi S	Tutor	BSc	2024	157879	01	-	02.11.23		Bhagyalakshmi

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

46.	Aradhana	Tutor	BSc	2024	157877	01	-	02.11.23		Aradhana
47.	Mariya KP	Tutor	BSc	2024	157890	01	-	02.11.23		
48.	Afrazmon Y	Tutor	BSc	2025	173618	3 months	-	13.02.25		
49.	Angel Mariya Benny	Tutor	BSc	2025	167594	3 months	-	13.02.25		
50.	Anil varghese	Tutor	BSc	2025	173620	3 months	-	13.02.25		
51.	Ansel Thomas	Tutor	BSc	2025	173623	3 months	-	13.02.25		
52.	Ansil B Paul	Tutor	BSc	2025	167590	3 months	-	13.02.25		
53.	Anushree Dey	Tutor	BSc	2025	173614	3 months	-	13.02.25		Anushree Dey
54.	Azhar Mahmood I	Tutor	BSc	2025	173598	3 months	-	13.02.25		
55.	chaithra K C	Tutor	BSc	2025	167592	3 months	-	13.02.25		
56.	Jobin Johnson	Tutor	BSc	2025	173624	3 months	-	13.02.25		
57.	Joseph Joy	Tutor	BSc	2025	173601	3 months	-	13.02.25		
58.	Nikhil S	Tutor	BSc	2025	167588	3 months	-	13.02.25		
59.	Rahul Das	Tutor	BSc	2025	173626	3 months	-	13.02.25		Rahul Das
60.	Ramkrishna Maity	Tutor	BSc	2025	173659	3 months	-	13.02.25		Ramkrishna Maity
61.	Anushu M	Tutor	BSc	2025	173612	2 months	-	04.04.25		
62.	Deepu K G	Tutor	BSc	2025	173611	2 months	-	04.04.25		
63.	Madhu	Tutor	BSc	2025	173607	2 months	-	04.04.25		
64.	Santosh Bavoor	Tutor	BSc	2025	173608	2 months	-	29.03.25		Santhosh
65.	Sneha M	Tutor	BSc	2025	173604	2 months	-	29.03.25		Sneha

- **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)**

66.	Veenath M S	Tutor	BSc	2025	173629	02month	-	28,03,25		Veenath
67.										
68.										
69.										
70.										
71.										
72.										
73.										
74.										
75.										
76.										
77.										
78.										
79.										
80.										
81.										
82.										
83.										
84.										
85.										
86.										
87.										
88.										

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
					COPY 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	38900 sq.ft	COPY ENCLOSED
	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	1472 X04	5888 sq.ft
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	1472 x 02	2944 sq.ft
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	600 X 10	6000 sq.ft
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each		
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	900 X 01	900 sq.ft
	2. Vice-Principal Chamber	200	400 X01	400 sq.ft
	3. HOD	5 x 200 = 1000	300 X 05	1500 sq.ft
	4. Professor/Assoc. Prof	800+2400=3200	1200 + 2700	3900 sq.ft
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		1600 X 01	1600 sq.ft
	7. Accountants Office		600 X 01	600 sq.ft
	8. Store Room		600 X 01	600 sq.ft
	9. Record room		300 X 01	300 sq.ft
	10. Room for maintenance staff		300 X 01	300 sq.ft
	11. Xeroxing room		100 X 01	100 sq.ft
	12. common room	1000	600 X 02	1200 sq.ft
	13. Seminar hall	3000	3100 X 01	3100 sq.ft
	14. Toilets	1000	1:5 ratio	1703 sq.ft
	15. A.V/Aids room	600	1000 X 01	1000 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	1650 x 01	1650 sqft
	Nutrition & Community Health Nursing	1200sq.ft	1395 x 01	1395 sqft
	Obstetrics and Gynecology Laboratory	900sq.ft	1050 x 01	1050 sqft
	Pediatrics Nursing Laboratory	900sq.ft	950 x 01	950 sqft
	Pre-Clinical Sciences Laboratory	900sq.ft	1200 x 01	1200 sqft
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500 x 01	1500 sqft

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.** Yes
3. **Tax paid receipt (Latest / current year)** Yes
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
01	KA42A2092	50	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	2490 sq.ft	YES ☑ No ☐	AVAILABLE	AVAILABLE	

Total No. of Nursing Books available	5310	**No. of Nursing Journals subscribed**	11
No. of Thesis/Research titles available	06	**Is internet facility available for Students?**	YES
No of e-books	04	**How many books were purchased in last financial year?**	245

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01	ASHITHA N	MLISC	04 years	
02	SINDHU G	MLISC	01 year	

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	COPY 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 VIVEKANANDA MEMORIAL HOSPITAL, AARYA HOSPITAL		100 100		92 %	
NAME OF THE TRUST/ Person owning The Hospital					
Name Of The Owner Of The Trust of Hospital					
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 TALUK GOVERNMENT HOSPITAL, GUNDLUPET	192	05 kms	92 %	
	2 TALUK GOVERNMENT HOSPITAL, NANJANGUDU	160		90 %	

(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

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:

College is having parent hospital and affiliated hospital as per norms.

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	30	90 %	60	94 %
Surgery including OT	30	91 %	60	92 %
Obstetrics & Gynecology	30	86 %	60	90 %
Pediatrics,	30	89 %	60	90 %
Emergency Medicine	10	82 %	09	93 %
Psychiatry	10	80 %	05	90 %

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	06	81 %	06	92 %
Minor OT	04	82 %	04	94 %
Dental, Otorhinolaryngology, Ophthalmology	10	84 %	10	92 %
Burns and Plastic	05	80 %	05	89 %
Neonatology care unit	05	80 %	06	93 %
Communicable disease/ Respiratory medicine/TB & chest diseases	-	-	05	90 %
Dermatology	05	80 %	05	91 %
Cardiology	05	82 %	07	93 %
Oncology	02	84 %	07	89 %
Neurology/Neuro-surgery	05	89 %	07	90 %
Nephrology/Urology	03	83 %	05	92 %
ICU/ICCU	10	93 %	12	90 %
Geriatric Medicine	-		05	90 %
Any other			21	90 %

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

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

19	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	NENEKATTE PHC
Adopted / Affiliated	AFFILIATION
Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
Distance from the Nursing Institute	04 kms
b. Services Rendered by Health & Family Welfare Programmes	HEALTH AND FAMILY WELFARE
URBAN FEILD :	
a. Name of CHC / PHC / SC	KABBALLI CHC
Adopted / Affiliated	AFFILIATED
Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
Distance from the Nursing Institute	12 kms
b. Services Rendered by Health & Family Welfare Programmes	HEALTH AND 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		
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 34,400 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 : 145	Boys : 56
f.	Total No. of rooms	Girls : 79	Boys : 22
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 Team visited college on 29/05/25 and found below mentioned Observation

1. College infrastructure, 6 labs, 16 class-room, principal chamber, common room, library available as per norms.
2. Teaching faculty physically present on the day of inspection and available as per norms.
3. Clinical facilities, parent Hospital available as per norms.
4. Library books lab articles are available as per norms.
5. Separate ~~boys~~ boys and girls hostel available.
6. Transport facility available as per RGUHS norms.
7. College applied for continuation of affiliation enhancement of B.Sc nursing (60 to 100) and enhancement of form (4) M.Sc nursing course and NPCC.
8. College have all the facilities to increase the B.Sc (N), M.Sc (N) and NPCC course as per RGUHS parameters.

Signature of Chairman 29/05/25

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 SNS COLLEGE OF NURSING, GUNDLUPET which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on 29.05.2025 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 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 DR. SRI SRI MUMMADI NIRVANA MAHA SWAMIJI are submitting the affidavit toUniversity.

The trust SRI NIRVANESWARA CHARITABLE TRUST (R) is running/managing the colleges 1. SNS COLLEGE OF NURSING, GUNDLUPET

2.

3. since 17 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.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

UNDERTAKING

I/We, GOVERNMENT OF KARNATAKA is/are the Owners/MD/CEO/Board Members of the TALUK GOVERNMENT hospital situated at GUNDLUPET AND NANJANGUDU.

This is to confirm that our hospital TALUK GOVT. HOSPITAL GUNDLUPET & NANJANGUDU is registered under KPMEA and PCB with 352 beds and the bonafide certificate has been attached.

This is to confirm that the hospital TALUK GOVT. HOSPITAL GUNDLUPET & NANJANGUDU is functioning as affiliated/parent/own hospital for SNS COLLEGE OF NURSING college.

We also confirm that our hospital is solely affiliated to SNS COLLEGE OF NURSING 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)

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at SNS COLLEGE OF NURSING, GUNDLUPET 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)

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