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. BASAVARAJ S SAVADI	PROF. BHAGYALAKSHMI. R	Mr. GURUPADA KP
Designation	PRINCIPAL	PRINCIPAL	ASSO. PROFESSOR
Address	SPOORTHI AYURVEDA MED. COLLEGE AYURVEDIC HOSPITAL GANGAVATHI	SRI LAKSHMI COLLEGE OF NURSING. MAGADI MAIN ROAD BANGALORE - 560091	KOIMS, Government COLLEGE OF NURSING MADIKERI, KODAGU.
Mobile No	9845646885	9738465046	9964244304
Email ID	dibssavadi123@gmail.com	spoorthygowda1@gmail.com	

For the Academic Year : 2025-26			*Date of Inspection:* 08.08.2025	
(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	SAPTHAGIRI COLLEGE OF NURSING NO15, CHIKKASANDRA HESARAGHATTA MAIN ROAD BANGALORE : 560090.	2	Year of Establishment: 2015
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	SRI SRINIVASA EDUCATIONAL AND CHARITABLE TRUST (Enclose copy of Registration documents of Society/Trust) Annexure – 1		
		Email: sapthagiri90collegeofnursing@gmail.com	Website: www.sapthagiricollegeofnursing.com	

Signature of Chairman

Dr Savadi

Signature of Member (1)

Dr. Bhagya

Signature of Member (2)

8/8/25

Gurupada-KP

	(b). Name of the Owner of Trust/Society	SHRI. G. DAYANAND		
4	Governing Council& Audit Report of Trust	**Total Number of Members in Governing Council :** (Enclose copy ofGoverning Council Members & Audit report of Society/Trust) **Annexure - 2**		
5	Details of Principal/Head of the institution	Name: PROF. MARIAM JAISY.G Qualification: M.Sc NURSING. Experience: 19 years. Email: jaisy8974@gmail.com	Mobile No: 9663767602 Office No: 080.22188700 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 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	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	₹ 187500/-	₹375001-	₹250000/-	₹ 25000/-	₹ 838550/-
Post Basic B.Sc. Nursing	-	-	-	-	-	-
					Total (A)	₹838550/-

PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty	
	1. - NA -	- NA -	- NA -
	2. - NA -	- NA -	- NA -
	3. - NA -	- NA -	- NA -
	4. - NA -	- NA -	- NA -
	5. - NA -	- NA -	- NA -
		Total (B)	
NPCC	- NA -	- NA -	- NA -
		Total (C)	
		Grand Total (A+B+C)	₹838550/-

Online Transaction Number or Details:

ZSBIAXW092USBY dated 23/12/24

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

Remarks:

- Verified -

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	MED246RGU 2024 10/12/2024 Annexure - 5	RGUHS/AFF/ NSG/359/2024 -25 26/12/25 Annexure - 6	1157/2024-25 27/4/24 Annexure - 7	NA Annexure - 8	- VERIFIED -
	Affiliation Sanctioned Intake	250	250	250	100	
	Admissions Made for the Current Academic Year	100 2024-25				
Post Basic B.Sc. Nursing	Approval Letter No. and Date	NA Annexure - 5	NA Annexure - 6	NA Annexure - 7	NA Annexure - 8	- VERIFIED -
	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	NA Annexure - 5	NA Annexure - 6	NA Annexure - 7	NA Annexure - 8	- VERIFIED -
	Sanctioned Intake	-	-	-	-	
	Admissions Made for the Current Academic Year	-	-	-	-	
M.Sc. NPCC	Approval Letter No. and Date	NA Annexure - 5	NA Annexure - 6	NA Annexure - 7	NA Annexure - 8	-
	Sanctioned Intake	-	-	-	-	

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:

Programme		I year	II Year	III Year	IV Year	Total
B.ScNursing	Male	50	54	59	45	208
	Female	50	46	36	51	183
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------
			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------
			NA			

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: - Verified -

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*			01	—	—	—	—	—	—	—	—
4	Associate Professor	2	2-4		1*			07	—	—	—	—	—	—	—	—
5	Assistant Professor	3	3-8	2	3*			09	—	—	—	—	—	—	—	—
6	Tutor	8-16	16-24	2-10	--			46	—	—	—	—	—	—	—	—
	Total	**16-24**	**24-40**	**4-12**				65	—	—	—	—	—	—	—	—

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)

Dr. Bhagwat

Signature of Member (2)

8/8/15

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.	PROF. MARIYAM JAISY G	PRINCIPAL	M.SC(N) PED	2006	20958	8	19	08/01/2020	yes	
2.	DR. MARY P E	VICE PRINCIPAL	M.SC(N) MHN	1999	6229	2	26	01/06/2019	no	
3.	PROF. R. GLORY JESIMA	PROFESSOR	M.SC(N)MSN	2008	16603	2	17	04/07/2025	no	
4.	MRS. EZHILARASI D	ASSO. PROF	M.SC(N)CHN	2011	4328	6	14	08/02/2021	no	
5.	MRS. PRECILLA JEBARANI	ASSO. PROF	M.SC(N) OBG	2012	3160	1	13	09/11/2020	no	
6.	MRS. TANGJAM IBEMCHA DEVI	ASSO. PROF	M.SC(N)MHN	2015	59409	4	10	11/12/2017	no	
7.	MRS. RASHMI. R	ASSO. PROF	M.SC(N) OBG	2015	39771	3	10	26/08/2024	no	
8.	MRS. RAMYA B	ASSO. PROF	M.SC(N) PED	2016	44429	3	9	07/03/2025	no	
9.	MRS. SANATHOMBI AKOIJAM	ASSO. PROF	M.SC(N) CHN	2014	2066	3	11	16/05/2019	no	
10.	MS. MANALI CHAKRABORTY	ASSO. PROF	M.SC(N) CHN	2017	9580	1	9	11/06/2025	NO	
11.	MRS. SUDHA D	ASST. PROF	M.SC(N) CHN	2019	81576	3	6	26/05/2023	"	
12.	MR. GIRISH CHANDRA M S	ASST. PROF	M.SC(N) MSN	2018	15835	8	7	08/01/2024	no	
13.	MS. DHANALAKSHMI V	ASST. PROF	M.SC(N) MHN	2020	2805	13	5	02/06/2025	no	
14.	MR. ABDHUL FARUK	ASST. PROF	M.SC(N) MHN	2021	93128	1	4	10/01/2024	no	
15.	MRS. GLADDY ISSAC	LECTURER	M.SC(N) MHN	2024	873	9	1	23/01/2025	no	
16.	MRS. SHAINY D S	LECTURER	M.SC(N) PED	2024	10669	1	1	23/03/2025	no (Leave)	
17.	MRS. RANJITHA A	LECTURER	M.SC(N) OBG	2024	111405	1	6 months	17/02/2025	no	
18.	MR AJISH A V	LECTURER	M.SC(N) MSN	2025	9625	2	6 months	07/10/2024	no	
19.	MRS. RADHA	LECTURER	M.SC(N) MSN	2024	111370	2	6 months	11/06/2025	no	
20.	MR. LENIN K S	TUTOR	B.SC(N)	2019	9895	6	–	27/07/2020	no	
21.	MRS. MANJU SKARIA	TUTOR	B.SC(N)	2011	40211	14	–	23/06/2025	no	
22.	MR. SAIKAT DAS	TUTOR	P.B.SC(N)	2019	233884	6	–	22/08/2024	no	

Signature of Chairman

Signature of Member (1)

Signature of Member (2) (Guruprasad KP)

23.	MS. ARYA P KUMAR	TUTOR	B.SC (N)	2023	159564	2	–	20/09/2024	Leave	—
24.	MR. RAJKUMAR M	TUTOR	B.SC (N)	2023	155354	2	–	28/11/2024	NO	
25.	MR. SUDEEP KHAMARI	TUTOR	B.SC (N)	2023	154542	2	–	08/10/2024	NO	
26.	MS. SAHANA P N	TUTOR	B.SC (N)	2021	120626	4	–	03/07/2024	NO	
27.	MS. EMEMA SUSSAN	TUTOR	B.SC (N)	2024	157738	1	–	02/12/2023	NO	
28.	MR. RISHAL JOHN	TUTOR	B.SC (N)	2024	162361	1	–	03/09/2024	NO	
29.	MR. VISHVA N	TUTOR	B.SC (N)	2023	155350	2	–	01/03/2024	NO	
30.	MS. SUNANDHA K	TUTOR	P.B.B.SC(N)	2019	109028	6	–	05/09/2019	NO	
31.	MS. AMEETA B R	TUTOR	P.B.BSC(N)	2013	71387	10	–	10/01/2015	NO	
32.	MR. KARAN KUMAR YADAV	TUTOR	P.B.B.SC(N)	2023	24	2	–	14/02/2024	NO	
33.	MR. SUBENDU BERA	TUTOR	B.SC (N)	2023	160207	2	–	11/01/2024	Leave	—
34.	MR. VINOTH KUMAR	TUTOR	B.SC (N)	2024	164517	1	–	24/01/2023	NO	
35.	MR. ABINANTH D	TUTOR	B.SC (N)	2024	16334	1	–	02/05/2024	NO	
36.	MS. KASTHURI DAS	TUTOR	B.SC (N)	2024	162760	1	–	02/05/2024	NO	
37.	MR. AKILESH K K	TUTOR	B.SC (N)	2022	138326	3	–	01/04/2023	NO	
38.	MR. JAGJEET GHOSH	TUTOR	B.SC (N)	2024	165018	1	–	12/02/2025	NO	
39.	MS. KATHA TARAFDER	TUTOR	B.SC (N)	2025	168985	–	–	07/01/2025	No	
40.	MR. RANJAN SINGHA	TUTOR	B.SC (N)	2024	168987	1	–	07/01/2025	NO	
41.	MS. NEETHU BHASKARAN	TUTOR	B.SC (N)	2014	76870	11	–	23/05/2019	Leave	—
42.	MS. SWARNALI DAS	TUTOR	B.SC (N)	2024	168915	1	–	28/12/2024	NO	
43.	MS. RAVINA JHADI	TUTOR	B.SC (N)	2023	143739	2	–	01/03/2025	NO	
44.	MS. ASHWINI	TUTOR	B.SC (N)	2024	164414	1	–	08/03/2025	NO	
45.	MR. NIHAS N	TUTOR	B.SC (N)	2024	150411	1	–	17/01/2025	NO	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

46.	MS. FATIHIMA SANA	TUTOR	B.SC(N)	2023	156525	2	-	08/11/2023	NO	
47.	MS. MEGHA G P	TUTOR	B.SC(N)	2023	147875	2	-	08/06/2025	NO	
48.	MS. JOYITA MODAK	TUTOR	B.SC(N)	2024	162295	1	-	29/06/2024	NO	
49.	MR. RAHUL UP	TUTOR	B.SC(N)	2017	107294	8	-	25/JUL/2021	NO	
50.	MR. BADIGERE MOUNESHA	TUTOR	B.SC(N)	2023	150797	2	-	21/11/2023	NO	
51.	MS. CHATTERI MOUNIKA	TUTOR	B.SC(N)	2022	10103	3	-	21/11/2023	NO	
52.	MRS. NEETHU SUSSAN THOMAS	TUTOR	P.B.B.SC(N)	2016	110604	9	-	21/11/2017	NO	
53.	MRS. PREMALATHA	TUTOR	P.B.B.SC(N)	2015	34295	10	-	31/05/2015	NO	
54.	MR. RAMESH KUMAR	TUTOR	B.SC(N)	2022		3	-	21/05/2023	NO	
55.	MRS. ARATHY M	TUTOR	B.SC(N)	2023	152440	2	-	10/05/2023	NO	
56.	MS. PAVITHRA B	TUTOR	B.SC(N)	2023	155342	2	-	04/04/2024	NO	
57.	MR. MUHAMMAD HABEEB	TUTOR	B.SC(N)	2023	158473	2	-	01/11/2023	NO	
58.	MR. SUMITHRA N	TUTOR	P.B.B.SC(N)	2024	124999	1	-	10/08/2024	NO	
59.	MS. MAMTHA M K	TUTOR	P.B.B.SC(N)	2024	132561	1	-	21/07/2024	NO	
60.	MS. PREMA UT	TUTOR	P.B.B.SC(N)	2020	128468	5	-	07/09/2020	NO	
61.	MS. SAVITHA D	TUTOR	B.SC(N)	2025	169940	-	-	01/03/2025	NO	
62.	MS. MEGHA S	TUTOR	B.SC(N)	2025	176606	-	-	01/03/2025	NO	
63.	MS. SHIHANA R	TUTOR	B.SC(N)	2024	175347	1	-	01/03/2025	NO	
64.	MS. SUVEETHA RANI	TUTOR	B.SC(N)	2020	110263	5	-	01/12/2020	NO	
65.	MRS. THULASAMMA	TUTOR	P.B.B.SC(N)	2019	48076		-	18/10/2024		

- **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
—			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	58374 sqft	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	8 CLASS ROOMS 1100sqft	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	-	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each	-	
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	576	verified
	2. Vice-Principal Chamber	200	300	verified
	3. HOD	5 x 200 = 1000	2000	verified
	4. Professor/Assoc. Prof	800+2400=3200	3200	verified
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		YES	verified
	7. Accountants Office		YES	verified
	8. Store Room		YES	verified
	9. Record room		YES	verified
	10. Room for maintenance staff		YES	verified
	11. Xeroxing room		YES.	verified
	12. common room	1000	1000	verified
	13. Seminar hall	3000	3000	verified
	14. Toilets	1000	1000	verified
	15. A.V/Aids room	600	1000	verified.

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

Dr. Bhagyalakshmi 8/8/25

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

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
02	KA 02 AC4112 KA 02 AC4111	57 each	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	2300 Sqft	YES ☑ No ☐	✓	✓	verified.

Total No. of Nursing Books available	5020	**No. of Nursing Journals subscribed**	10
No. of Thesis/Research titles available	25	**Is internet facility available for Students?**	Yes.
No of e-books	1016	**How many books were purchased in last financial year?**	238

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1.	Mr. MOHANKUMAR	M.LIB	27	verified
2	Mr. KRISHNA KH	BA M.LIB	5	verified
3	MS. NAYANA	MLIB	1	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 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	25	verified
Conferences conducted	04	verified
Conferences attended	45	verified.

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 SAPTHAGIRI BROAD AND SUPER-SPECIALTY HOSPITAL NO 15 CHIKKASANDRA HESARAGHATTA MAIN ROAD B'lore-90		1700.	0KM	78.1.	verified.
NAME OF THE TRUST/ Person owning The Hospital SRI SRINIVASA EDUCATIONAL AND CHARITABLE TRUST		–	–	–	–
Name Of The Owner Of The Trust of Hospital SHRI. G. DAYANAND		–	–	–	–
Affiliated hospitals-Full Name & Address of the Parent Hospital	1 –	–	–	–	–
	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/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: 1. Community PHC Rural KANASOADI PHC Posting
2. Community PHC URBAN ABBIGERE & MALLASANDRA PHC.
Payment details are enclosed.

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

Dr. Bhagyalakshmi

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	320	78%.	-	-
Surgery including OT	320	80%.	-	-
Obstetrics & Gynecology	200	80%.	-	-
Pediatrics,	120	81%.	-	-
Emergency Medicine	30	80%.	-	-
Psychiatry	30	78%.	-	-

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	19		-	-
Minor OT	07		-	-
Dental, Otorhinolaryngology, Ophthalmology	120	80%.	-	-
Burns and Plastic	04	2 beds.	-	-
Neonatology care unit	20	78%.	-	-
Communicable disease/ Respiratory medicine/TB & chest diseases	30	82%.	-	-
Dermatology	40	80%.	-	-
Cardiology	30	80%.	-	-
Oncology	20	81%.	-	-
Neurology/Neuro-surgery	05	80%.	-	-
Nephrology/Urology	20	75%.	-	-
ICU/ICCU	100	90%.	-	-
Geriatric Medicine	20	80%.	-	-
Any other				

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

Signature of Chairman

Signature of Member (1)

Dr. Shaggufta

Signature of Member (2) 3/8/21

19	COMMUNITY HEALTH NURSING :Annexure - 17	
RURAL FILELD		
a.	**Name of CHC / PHC / SC**	KANASCOADI PHC
	Adopted / Affiliated	AFFILIATED
	Administrate red by	**State Govt.** ☐ **Municipal Corporation** ☐ **Private** ☐
	Distance from the Nursing Institute	22 KM
b.	Services Rendered by Health & Family Welfare Programmes	MCH services, Immunization programs National Health programs
URBAN FEILD :		
a.	**Name of CHC / PHC / SC**	ABBIGERE & MALLASANDRA PHC
	Adopted / Affiliated	AFFILIATED
	Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
	Distance from the Nursing Institute	3 KM
b.	Services Rendered by Health & Family Welfare Programmes	MCH services, Immunization, school Health programs, National Health prog

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)** 8/8/15

15

Dr. Bhagyalakshmi

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 18000/-	
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 : 65	Boys : 070
f.	Total No. of rooms	Girls : 120	Boys : 68
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)

Dr. Shaggle

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: The LIC inspection committee has conducted at Sapthagiri college of Nursing, Bangalore for continuation of application.

1. College: the college was established in the 2015. The total area of the college is 58,374 sq ft including 6 class rooms, 6 laboratories, like Nursing foundation, pre clinical, Nutrition & community, OBG & paediatric, AV aids room, staff room, HOD rooms, male & female separate rest rooms with all all furniture & equipments, Charts, models are observed on the day of inspection.
2. Teaching Staffs:- Full time principal is present on the day of inspection. Three professor, 7 associate prof, 9 Assistant profs, 45 tutors are shown out of which one lecturer & four tutors are on leave on the day of inspection.
3. Library: Library have 2970 books with 10 journals & 10 magazines with seating capacity to students observed on day of inspection.
4. Hospital:- patient hospital name as Sapthagiri institute of medical sciences & Hospital with 170 beds. KPME, PCB, BMW certificates are observed and fully functional opd, ipd, ECG & Lab. USG, all modern equipments & furniture are fully functional & observed.
5. Transportation facilities:- Transportation facilities with two buses with seating capacities of 52 each. RC book & Driver licences are observed

Signature of Chairman

Signature of Member (1)

Dr Bhagyalakshmi

Signature of Member (2)

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Description of Document	:	Article 4 Affidavit
Property Description	:	UNDERTAKING
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Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

N. MAHESHA Bengaluru (Rural) Rural Area 12/86 01-2027

For Karnataka State Co-Operative Societies Association (R) Bagalagunte Branch

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 Sapthagiri College of Nursing which has applied for continuation of affiliation for the academic year 2025-26.

undertaking for lic team (4)

We have conducted LIC inspection of this college on 0 /08/25 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)

ATTESTED BY ME

N MAHESHA, B Com, LL.B.,
ADVOCATE & NOTARY
No. 12/13, 2nd Floor, Scholars Enclave
Kamath Layout, Chennanayakana Palya
Chikkabidarakallu Bangalore - 56[illegible]

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)

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 SAPTHAGIRI COLLEGE OF NURSING. which has applied for continuation of affiliation for the academic year ~~2024-25~~. 2025-26

We have conducted LIC inspection of this college on 8/8/25 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.

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Senate Member (Chairman)

A C Member (Member)

Dr Bhagyalakshmi

Subject Expert (Member)

Gurupada KP

UNDERTAKING

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Senate Member (Chairman)	A C Member (Member)	Subject Expert (Member)
	Dr. Bhagyalakshmi	8/8/25 Jayapadatta
Signature of Chairman	Signature of Member (1)	Signature of Member (2)

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Second Party	:	VICE CHANCELLOR RGUHS
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Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

NOTARY G.M.MAHESHA GOVT. OF INDIA

For Karnataka State Co-Operative Societies Association (R) Bagalagunte Branch

Please write or type below this line

UNDERTAKING

I/We, SHRI G. DAYANAND **is**/are the **Owner**/MD/CEO/Board Members of the Sapthagiri Broad and Super Speciality Hospital situated at No: 15, Chikkasandra, Hesaraghatta Main Road, Bangalore:90.

This is to confirm that our hospital Sapthagiri Broad and Super Speciality Hospital is registered under KPMEA and PCB with 1700 beds and the bonafide certificate has been attached.

This is to confirm that the hospital Sapthagiri Broad and Super Speciality Hospital is functioning as affiliated/**parent**/own hospital for Sapthagiri Nursing college.

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

The information provided by us is true and correct.

NOTARY GOVT. OF INDIA

DEPONENT

ATTESTED BY ME

N MAHESHA, B.Com, LL.B.,
ADVOCATE & NOTARY
No. 12/13, 2nd Floor, Scholars Enclave,
Kamath Layout, Chennanayakana Palya
Chikkabidarakallu Bangalore - 560 073

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Stamp Duty Paid By	:	CHAIRMAN SRI SRINIVASA EDUCATIONAL AND CHARITABLE
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

For Karnataka State Co-Operative Societies Association (R) Bagalagunte Branch

Please write or type below this line

UNDERTAKING by Trust Management

I the **Chairman**/President/Secretary/Member of the trust SHRI G DAYANAND is submitting the affidavit to University.

The trust SRI SRINIVASA EDUCATIONAL AND CHARITABLE TRUST is running/managing the colleges 1. Sapthagiri College of Nursing since 2015

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.

DEPONENT

ATTESTED BY ME

N MAHESHA, B.Com, LL.B.,
ADVOCATE & NOTARY
No. 12/13, 2nd Floor, Scholars Enclave,
Kaveri Layout, Chennanayakana Palya,
Chikkabidarakallu, Bangalore - 560 073