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. VINUTHA RAO	Dr. T. RAKESH	Ningangouda Patil
Designation	PRINCIPAL.	PRINCIPAL	Professor.
Address	MVM College of Naturopathy & Yogic Science, Tolahunka	Akshay College of Pharmacy, Tumkur	Sajjalashree INS. Bagalkote
Mobile No	9980181331	8722517795	9902280515
Email ID	drvinuthamvm@gmail.com	prakashtigari@gmail.com	

For the Academic Year : 2025-2026. ***Date of Inspection:*** 19/05/2025

(Please Tick the Appropriate Boxes Below)

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

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

1	**Name of the Institution with Full Address**	SMT. VASANTHA COLLEGE OF NURSING, KHB. COLONY, GULBARGA – 585105	2	**Year of Establishment** 2012.
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**	SHRI SHIVALINGA VIDYA VARDHAKA EDUCATION TRUST (R) DUTI NAGAR, GULBARGA (Enclose copy of Registration documents of Society/Trust) Annexure – 1 Email: SSVET2007198@gmail.com Website: www.vasanthacollege.com		

Signature of Chairman
Dr. Vinutha Rao.

Signature of Member (1)
(Dr. T. Rakesh) 19/05/2025

Signature of Member (2)
Dr Ningangouda

	(b). Name of the Owner of Trust/Society	SRI. CHANDRAKANT. GADDGI. Chairman. Shri. Shivalinga Vidya Vardhaka Education Trust(R)
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : 05. Enclosed. (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2
5	Details of Principal/Head of the institution	Name: Prof. Dr. Siddram. G, Qualification: Phd (N) Experience: 10 years. Email: smtvasanthasongth@gmail.com. Mobile No: 9845870400 Office No: Fax No: 9606303333. 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) Enclosed - 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	Contin Affi				25,000/-	2,77,100/-
Post Basic B.Sc. Nursing	"				-	/
					Total (A)	2,77,100/-

PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty	
	1. Community Health Nursing	50000/-	
	2. Medical & Surgical Nsg	50000/-	
	3. OBG. Nursing	50,000/-	
	4. Psychiatric Nursing	50,000/-	
	5. Paediatric Nursing	50,000/-	
		Total (B)	2,50,000/-
NPCC	Nurse practioner in Critical Care	50,000/-	1050/-
		Total (C)	50,000/-
Three lakh one thousand fifty only!		Grand Total (A+B+C)	3,01050/-

Online Transaction Number or Details:

Transaction ID:- BDO000000801318 9. Pay Ref No. BIOBDNS0GGORQL. 24/3/23

Signature of Chairman

Signature of Member(1)

Signature of Member (2)

Remarks:

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	MED18MPS 2021. D-10/3/22 Annexure - 5	RGU/AFF/ N899/Incri 2021. D-11/2/21 Annexure - 6	878/23-24 D-10/6/23 Annexure - 7	- Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60	-	
	Admissions Made for the Current Academic Year	60	60	60.	-	
Post Basic B.Sc. Nursing	Approval Letter No. and Date	AK9K89KVM 2019 18-7-2019 Annexure - 5	RGU/AFP/N378 Fr. PBBSc/2019-20 D-13/3/2019 Annexure - 6	878/23-24 10/6/23 Annexure - 7	Annexure - 8	
	Sanctioned Intake	30	30	30	-	
	Admissions Made for the Current Academic Year	30	30	30.	-	
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	
	Sanctioned Intake	FRESH - APPLIED			-	
	Admissions Made for the Current Academic Year	-	-	-	-	
M.Sc. NPCC	Approval Letter No. and Date	FRESH APPLIED Annexure - 5	Annexure - 6	Annexure - 7	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	16	16	22	30	84
	Female	34	34	38	30	136
Post Basic B.Sc Nursing	Male	12	10	- NA -	- NA -	22
	Female	28	20	- NA -	- NA -	48
M.Sc Nursing	Male					
	Female	FRESH	APPLIED	COURSE		-
M.Sc NPCC	Male					-
	Female	FRESH	APPLIED	COURSE		

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——
		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——
		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:

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	30			40 to 60	61 to 100			
1	Principal	1	1				01									
2	Vice-Principal	1	1				01									
3	Professor	1	1-2		1*		01		01							
4	Associate Professor	2	2-4		1*		04									
5	Assistant Professor	3	3-8	2	3*		08									
6	Tutor	8-16	16-24	2-10	--		17									
	Total	**16-24**	**24-40**	**4-12**			32									

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

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

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

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

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

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

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience		Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG	After PG			
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Signature of Chairman Signature of Member (1) Signature of Member (2)

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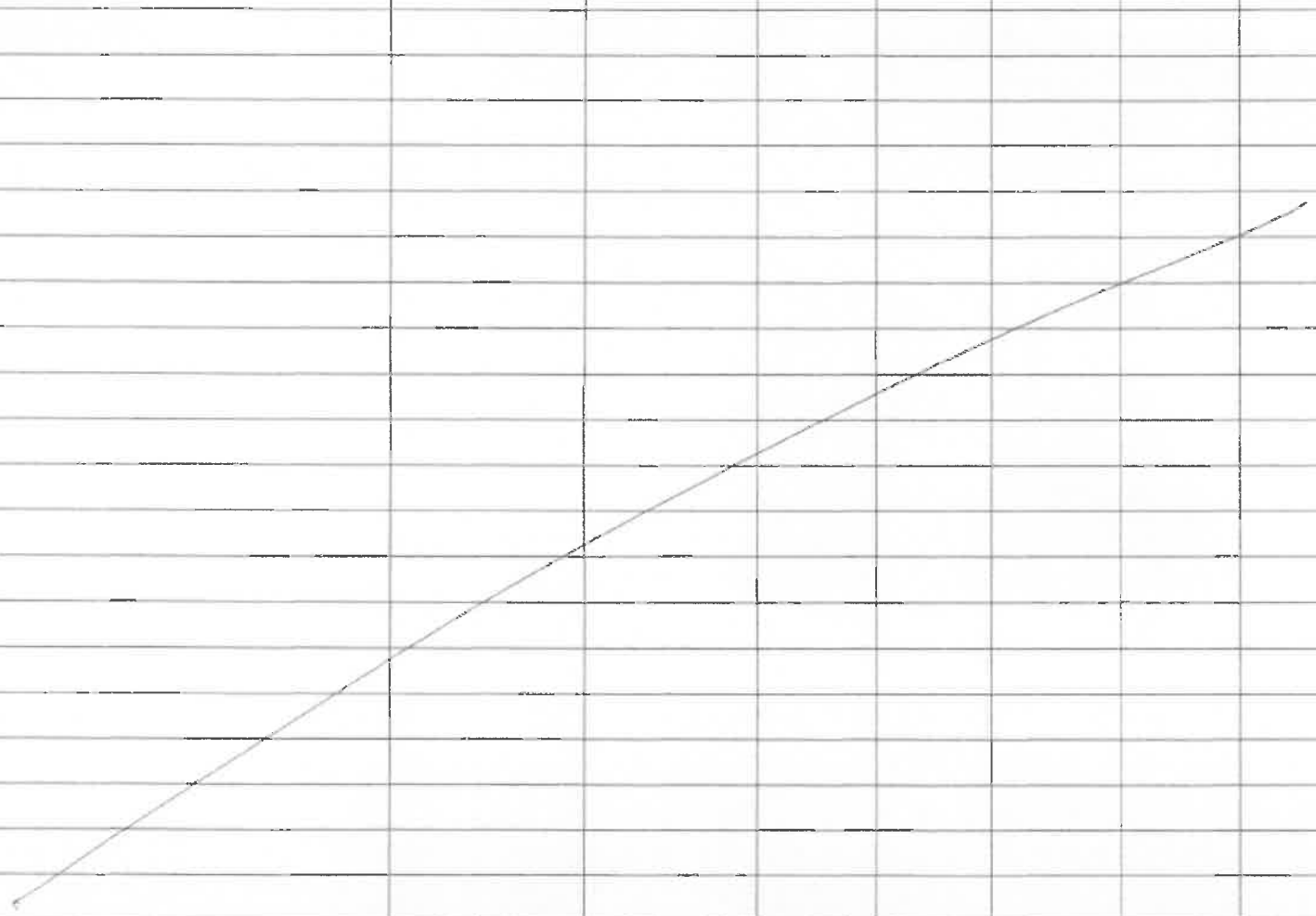

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

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

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

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

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		
	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 class Rooms 4X900 sq ft = 3600 sq ft	
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	2 class Rooms 900X2 = 1800 Sqft	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	2 class Rooms 900X2 = 1800 Sqft	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each	— NA -	
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	300 Sqft.	
	2. Vice-Principal Chamber	200	200 Sqft	
	3. HOD	5 x 200 = 1000	05X300=1500 Sqft	
	4. Professor/Assoc. Prof	800+2400=3200	4000 Sqft.	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		200 Sqft.	Enclosed
	7. Accountants Office		200 Sqft	
	8. Store Room		200 Sqft	
	9. Record room		200 Sqft	
	10. Room for maintenance staff		200 Sqft	
	11. Xeroxing room		200 Sqft	
	12. common room	1000	1000 Sqft	
	13. Seminar hall	3000	3000 Sqft	
	14. Toilets	1000	1000 Sqft	
	15. A.V/Aids room	600	900 Sqft.	

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	1800 Sq.ft.	
	Nutrition & Community Health Nursing	1200sq.ft	1200 Sqft.	
	Obstetrics and Gynecology Laboratory	900sq.ft	900. Sqft.	
	Pediatrics Nursing Laboratory	900sq.ft	900. Sqft	Enclosed
	Pre-Clinical Sciences Laboratory	900sq.ft	900. Sqft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	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.**
3. **Tax paid receipt (Latest / current year)**
4. **Occupancy certificate.**
5. **Sale deed / Lease deed of the building / Land.**

} Enclosed Copy.

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	KA38 C0015	38	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	2500 Sqft	YES ☑ No ☐	✓	✓	

Total No. of Nursing Books available	3072	**No. of Nursing Journals subscribed**	09
No. of Thesis/Research titles available	- Nil -	**Is internet facility available for Students?**	Yes
No of e-books	- Nil -	**How many books were purchased in last financial year?**	618

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01	Mrs. Surekha.	M-Lib.	10 years.	
02.	Mrs. Sweetha	B-Lib.	05 years.	
-	-	-	-	

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		
Conferences conducted	Nil	
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 Oxylife Multispeciality Hospital,	100	5 km.	80%.	
NAME OF THE TRUST/ Person owning The Hospital Shri. Shivalinga Vidya Vardhaka Education Trust DR. PRIYA. GADDGI	-	-	-	
Name Of The Owner Of The Trust of Hospital DR. PRIYA GADDGI	-	-	-	
Affiliated hospitals- Full Name & Address of the Parent Hospital 1 Govt. Institute of Medical Sciences Kalaburagi	750	2 km.	90 %	
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:

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

To,

The Principal

Smt. Vasantha college of

Nursing,

Kalaburagi

Sub:- Application for One day leave.

Respected sir,

I am Priscila working as a Associate professor, in your college, I want One day leave on 29/05/25 for my personal issues, please permit me

Thanking you.

Priscilla.

Smt. Vasantha college of Nursing Kalaburagi

PRINCIPAL
Smt. Vasantha College of Nursing
KALABURAGI

To,

The Principal
Smt Vasantha college of
Nursing, Kalaburagi

Sub :- Application for one day leave.

Respected sir,

I am Sunil kumar working as an Associate professor in your college, Sir, I want one day leave on 19/05/25 for my personal reason, please grant me.

Thanking you.

Sunil kumar.
Smt. vasantha college of
Nursing, Kalaburagi

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	10	70%.	50	80%
Surgery including OT	10	70%.	10	70%.
Obstetrics & Gynecology	05	70%.	50	75%.
Pediatrics.	05	80%.	50	80%.
Emergency Medicine	08	70%.	50	80%.
Psychiatry	02.	50%.	20	80%.

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	01	100%.	10	80%.
Minor OT	02	50%.	10	78%.
Dental, Otorhinolaryngology, Ophthalmology	02	50%.	10	80%.
Burns and Plastic	02	50%.	20	85%.
Neonatology care unit	05	70%.	20	85%.
Communicable disease/ Respiratory medicine/TB & chest diseases	05	70%.	20	80%.
Dermatology	02	50%.	20	85%.
Cardiology	05	80%.	40	80%
Oncology	02	50%.	40	80%
Neurology/Neuro-surgery	02	50%.	40	85%.
Nephrology/Urology	02	50%.	30	88%.
ICU/ICCU	05	70%.	30	80%.
Geriatric Medicine	05	70%.	20	80%.
Any other	10	80%.	50	80%.

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	Anad PHC. Affiliated
	Adopted / Affiliated	
	Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
	Distance from the Nursing Institute	12 KM.
b.	Services Rendered by Health & Family Welfare Programmes	VACCINATION, MINOR. OT.
URBAN FEILD :		
a.	Name of CHC / PHC / SC	Rajapur. PHC. Affiliated
	Adopted / Affiliated	
	Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
	Distance from the Nursing Institute	03 KM
b.	Services Rendered by Health & Family Welfare Programmes	LABOUR, VACCINATION, ICDCS,
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	
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 :	Boys :
f.	Total No. of rooms	Girls :	Boys :
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	- NA -	✓
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	- Applied -	

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:

On the day of Inspection on 19/5/21 at Smt Vasantha College of Nursing following observations were made.

- Infra structure is satisfactory.
- labs were spacious and well equipped.
- library has sufficient no of books.
- Building documents were varified and found correct
- College has a parent hospital "Oxy life Multi Speciality hospital and on the day of inspection it was under interior work and has KPME Certificate and applied for PCB Certificate.

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 Smt. Vasantha 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 19/5/25 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)
Signature of Chairman	Signature of Member (1)	Signature of Member (2)

Regd. GLB-4-00014

SHRI. SHIVALINGA VIDYAVARDHAK EDUCATION TRUST (R)

Plot No. 14, Datta Nagar, NGO's Colony, Near Dattatreya Temple, KALABURAGA - 585102
Ph: +91 96063 03333 - 9844005135 - Email: ssvetrust01@gmail.com

Ref No. SVES/45/SVES VCO1'

Date: 16/05/2025

To

The Registrar,

Rajiv Gandhi Health Sciences University (RGUHS),

Bengaluru.

Subject: Parent Hospital - Oxylife Multi-Specialty Hospital

Respected Sir,

With reference to the above subject, we would like to inform you that our parent hospital is Oxylife Multi-Specialty Hospital, Gulbarga. The hospital has a capacity of 100 beds Although the hospital as Some minor interior work is ongoing and is expected to be completed within a few days & is currently operational, its official inauguration is scheduled for May-29-2025. We confirm that the hospital is functioning and providing healthcare services, and it is exclusively affiliated with Smt. Vasantha College of Nursing.

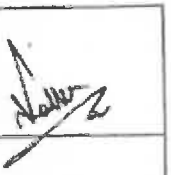
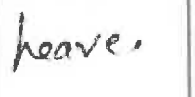
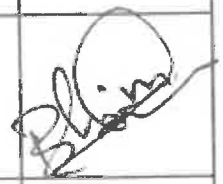
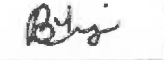
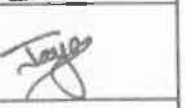
Chairman

Shri Shivalinga Vidhya Vardhak
Education Society (R)
Gulbarga

Smt.Vasantha College of Nursing, KALABURAGI

Teaching Staff List-2025

S. No.	Name of the Faculty	Pan Card	Designation	Qualification along with specialty	UG Year of Passing	Registration No. RN/RM	Teaching		Date of Joining	Form-16 Submitted (Yes/No	Sugnature of Faculity
							B.Sc.	M.Sc.			
1.	Mr.Siddaram Guddad		Principal	Ph.D (M.Sc) Nursing (Psychiatric)	2008	RN-8630	10 Years	08 Years	01.04.2023	Yes	
2.	Mrs. Jiji Jhon		Asst Professor	M.Sc Nursing (Psychiatric)	2019	RN-65081	10 Years	06 Years	05.10.2019	Yes	
3.	Mr.Sharanabasappa S		Professor	M.Sc Nursing (Pediatrics)	2011	RN-17859	11 Years	10 Years	03.12.2014	Yes	
4.	Mrs.Ashwini Rathod		Associate Professor	M.Sc Nursing (Pediatrics)	2014	RN-7643	12 Years	08 Years	04.05.2021	Yes	
5.	Mr.Prashantayya. K		Associate Professor	M.Sc Nursing (Pediatrics)	2013	RN- 15474	13 Years	08 Years	01.04.2022	Yes	
6.	Mr. Rajashekhar Kumbar		Associate Professor	M.Sc Nursing (Pediatrics)	2012	RN-8306	12 Years	07 Years	01.07.2022	Yes	
7.	Mr. Sunil Kumar		Associate Professor	M.Sc Nursing (Pediatrics)	2013	RN-05893	13 Years	09 Years	01.03.2022	Yes	Leave.
8.	Ms.Saraswati		Asst. Professor	M.Sc Nursing (Pediatrics)	2024	RN-26426	08 years	01 Years	01.02.2025	Yes	
9.	Mrs.Brizit Neeta		Asst. Professor	M.Sc Nursing (Pediatrics)	2024	RN-31352	11 Years	01 Years	01.03.2025	Yes	
10.	Mr.Mahesh Loni		Associate Professor	M.Sc Nursing (Medical Surgical)	2013	RM-08292	14 Year	07 Years	01.04.2022	Yes	

11.	Mr.Vinod Kumar		Asst Professor	M.Sc Nursing (Medical Surgical)	2021	RN-23564	10 Years	04 Years	01.07.2022	Yes	
12.	Mrs.Prescila		Associate Professor	M.Sc Nursing (Community Health Nursing)	2012	RN-15894	12 Years	09 Years	01.03.2023	Yes	
13.	Mr. Bhimashankar		Asst Professor	M.Sc Nursing (Community Health Nursing)	2017	RN-28855	11 Years	05 Years	01.04.2023	Yes	
14.	Mrs.Esther.S		Professor	M.Sc Nursing (OBG)	2003	RN48866 RN -880	20 Years	15 Years	01.07.2017	Yes	
15.	Mrs.Hosmani Kamala Shanthraj		Asst Professor	M.Sc Nursing (OBG)	2024	RN-35085	01 Years	01 Years	01.02.2025	Yes	
16.	Ms.Archana		Clinical Instructor	Teaching and Clinical Supervision	2019	RN-127386	04 Years	-	01.03.2021	Yes	
17.	Ms.Saroja		Clinical Instructor	Teaching and Clinical Supervision	2021	RN-109313	03 Years	-	01.04.2022	Yes	
18.	Mrs.Rakshita		Clinical Instructor	Teaching and Clinical Supervision	2022	RN-141765	02 Years	-	01.12.2022	Yes	
19.	Ms.Shwetha		Tutor	-	2022	RN-145077	1.5 Years	-	01.02.2023	Yes	
20.	Ms.Jayashhree		Tutor	-	2024	RN-163136	01 Years	-	01.10.2024	No	
21.	Ms.Zebanahek		Tutor	-	2023	RN-18144	01 Years	-	16.09.2024	No	
22.	Ms.Sneha		Tutor	-	2024	RN162093	01 Years	-	23.09.2024	Yes	

23.	Mr.Sunny		Tutor	-	2018	RN-94588	02 Years	-	01.08.2024	Yes	
24.	Mr.Pradeep		Tutor	-	2022	RN-133022	02 Years	-	01.08.2024	Yes	
25.	Mr.Sudarshan		Tutor	-	2022	RN-133013	01 Years	-	01.09.2024	No	
J	Mr.Shashikanth		Tutor	-	2022	RN-132999	01 Years	-	13.09.2024	Yes	
27.	Mr.Richard	ESZPR8705J	Tutor	-	2023	RN-146003	01 Years	-	05.01.2025	No	
28	Mr.Patil Akash Shivanand		Tutor	-	2023	RN - 158507	01 Years	-	12.07.2024	No	
29	Mr. Gubyad shivam		Tutor	-	2023	RN - 145896	01 Years	-	05.07.2024	No	
30	Mr. Ghodke parveen		Tutor	-	2024	RN - 158504	01 Years	-	05.07.2024	No	
31	Chumbalkar smartharth		Tutor	-	2023	RN - 145940	01 Years	-	05.07.2024	No	
32	Mr. Abhishek		Tutor	-	2024	RN - 172012	Fresher	-	01.05.2025	No	

Signature of Chairman

Signature of Member (1)

Signature of Member

Smt. Vasantha College of Nsg - Gulbarga.

→ Applied for : Continuation of Affiliation
→ Additional Course.

→ LIC Inspectors
Chairman : Dr. Vinutha Rao.
ACM : Dr. T Prakash.
Sub Expert : Ningangouda Patil

→ Trust Since : 2021 (Document of Trust deed shows that the trust starts from 2021) Enclosed

→ Est : 2012.

→ Trust :- Shri Shivalinga Vidya Vardhaka Education Trust

→ College Area :- Own.
- 23,200 sq ft as per the physical verification of LIC inspectors.

→ No of classrooms & Area :- B.Sc - 04 × 900 sq ft each = 3600 sq ft
PBBSc - 02 × 900 sq ft each = 1800 sq ft.
M.Sc - 02 × 900 sq ft each = 1800 sq ft.

→ Library Area :- 2500 sq ft.

→ Books :- 3072.

→ Lab No :- 06.

→ Lab Area :- NF - 1800 sq ft
Nutrition → 1200 sq ft
OBG → 900 sq ft
Pedia - 900 sq ft
Re-clin - 900 sq ft
Comp - 1500 sq ft


Rajapur Road, Kalaburagi
GPS Map Camera
Kalaburagi, Karnataka, India
19, 19, Sedam Rd, Rajapur, Kalaburagi, Karnataka 585105, India
Lat 17.322256° Long 76.848218°
19/05/2025 09:32 AM GMT +05:30
Google

सत्यमेव जयते

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Government of Karnataka

Rs. 100

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Account Reference	:	NONACC (FI)/ kaksfcl08/ GULBARGA1/ KA-GU
Unique Doc. Reference	:	SUBIN-KAKAKSFCL0883506481533968X
Purchased by	:	CHAIRMAN SSVET KALABURAGI
Description of Document	:	Article 12(b) Bond - Amount exceeding Rs.1000
Property Description	:	BOND
Consideration Price (Rs.)	:	1,001 (One Thousand And One only)
First Party	:	CHAIRMAN SSVET KALABURAGI
Second Party	:	REGISTRAR RGUHS BANGALORE
Stamp Duty Paid By	:	CHAIRMAN SSVET KALABURAGI
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

Authorised Signatory
For : Mahila Souharda Sahakari
Niyamita, Kalaburagi.

Please write or type below this line

NOTARY
KUSUMAKAR
R.V.
Dist. Kalaburagi
Reg.No.21504/2020
Ex.Dt.08-03-2030
GOVT. OF INDIA

14 MAY 2025

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Government of Karnataka

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Certificate No.	:	**IN-KA30165408597327X**
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Account Reference	:	NONACC (FI)/ kaksfcl08/ GULBARGA1/ KA-GU
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Purchased by	:	MD OXYLIFE MULTI SPECIALITY HOSPITAL KALABURAGI
Description of Document	:	Article 12(b) Bond - Amount exceeding Rs.1000
Property Description	:	BOND
Consideration Price (Rs.)	:	1,001 (One Thousand And One only)
First Party	:	MD OXYLIFE MULTI SPECIALITY HOSPITAL KALABURAGI
Second Party	:	REGISTRAR RGUHS BANGALORE
Stamp Duty Paid By	:	MD OXYLIFE MULTI SPECIALITY HOSPITAL KALABURAGI
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

Authorised Signatory
For : Mahila Souharda Sahakari
Niyamita, Kalaburagi.

Please write or type below this line

NOTARY
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