



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	MELBIN MISHAEL ARAKAL	Dr. Sunil V. Dhaded	PRASHANTHA S
Designation	Associate Professor	Professor	PRINCIPAL
Address	Laasya College of Nursing Bangalore	AME'S Dental College Raichur	Sneha College of Nursing, Bangalore
Mobile No	9739215124	9844101555	8660158659
Email ID	melbin000@gmail.com	sunildhaded2000@gmail.com	prashanthasgonda@gmail.com

Inspection For the Academic Year : 2025-26

Date of Inspection: 12/08/2025

(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	EXCELLENT COLLEGE OF NURSING K SRTC Colony, Athani Road Vijayapur - 586101	2	Year of Establishment
			2022	
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 & Phone number	MATHOSHREE GOURAMMA APPASAHEB BABALESHWAR GRAMINABHIRUDDI SAMSTHE'S, AT/POST - NAMADAPUR TB - BABALESHWAR DIST - VIJAYAPUR - 586113 (Enclose copy of Registration documents of Society/Trust) Annexure - I		
		Email: excellentcon2021@gmail.com	Website:	
		Office No: 08352-456469	Mobile No: 8618828721	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Dr. Sunil Dhaded

(b). Name of the president/Secretary/Chairman of Trust/Society & Phone No		SANGAMESH A BABALESHWAR	
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 13 (Enclose copy of Governing Council Members & Audit report of Society Trust) Annexure - 2	
5	a) Details of Principal/Head of the institution (After MSc)	Name: Mrs. SHWETA BIRADAR Qualification: MSc(N) in OBGYN Experience after MSc: 12 yrs Email: shwetabiradar.shweta.biradara@gmail.com	Mobile No: 7829788801 Office No: 08352-456469 Fax No: Residential phone No:
	b) Drawing authority of the college	PRINCIPAL	
6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☒
If yes, Specify the full name of the nursing institution with full address Verify with the original TRUST document (Verify & enclose a copy of the registered trust Documents) Annexure - 3			

7. Affiliation Fee Paid Details:

Annexure - 4

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UG b) for UG and PG courses c) NPCC	
B.Sc. Nursing	Continuation Affiliation	30,000/-	60,000/-	40,000/-	25,000/-	1,55,000/-
Post Basic B.Sc. Nursing						
Total (A)						
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation		No of Seats X Prescribed fees of each faculty			
	1.	NA				
	2.					
	3.					
	4.					
	5.					
Total (B)						
NPCC						
Total (C)						
Grand Total (A+B+C)						

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Remarks:

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	G.O.NO.MED: 146;MSF:2022 Dt-05/08/2022 Annexure - 5	RGUHS NO: 240/AFF/NS68/ 2021-22, Dt-10/08/2022 Annexure - 6	KSNC: NO.KSNC: 2117:2022/23 Dt-26/09/2022 Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake	40	40	40		
	Admissions Made for the Current Academic Year	24				
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					
	Admissions Made for the Current Academic Year					
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					
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake					
	Admissions Made for the Current Academic Year					

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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	14	28		58
	Female	08	16	12	3	36
Post Basic B.Sc Nursing	Male					
	Female					
M.Sc Nursing	Male					
	Female					
M.Sc NPCC	Male					
	Female					

10. If the college has PBBS(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:

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 NPC C	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	NPC C	B.Sc (N)	P.B. B.Sc (N)	M.Sc (N)	M.Sc NPC C
		40 to 60	61 to 100	101 to 150	151 to 200	201 to 250	20 to 60										
1	Principal	1	1							1							
2	Vice-Principal	1	1							1							
3	Professor	1	1-2					1*		—							
4	Associate Professor	2	2-4					1*		1							
5	Assistant Professor	3	3-8				2	3*		3							
6	Tutor	8-16	16-24				2-10	--		10							
	Total	16-24	24-40				4-12			16							

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

Note: 1) Institute shall have sections of 100/60 students (Maximum number of students 100 per section)

2) 1:10 teacher student ratios shall be ensured.

3) 1:3 student patient ratio in the clinical areas prescribed in the syllabus shall be adhered.

4) Physical facilities including laboratories and having additional hospital(s) should be increased as per norms

(The Faculty and Student Ratio is 1:10 and *For M.Sc. Nursing: Depends on Speciality offered and ratio remains same i.e. 1:5 if they offer B.Sc Nursing Program)

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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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
150 students intake				
200 students intake				
250 students				

* Aadhar based biometric attendance for students

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

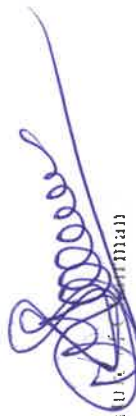
Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience	Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG After PG			
1.	Mrs. Shweta. Bixadar	PRINCIPAL	MSc(N) OBG	2013	13521	2405	12405	02/11/2022	
2.	Mrs. Soumya R	Vice principal	MSc(N) Paediatric	2014	30650	148	10405	06/02/2023	
3.	Mrs. Uma N	Asso. Professor	MSc(N) MEN	2018	64735		6405	05/01/2023	
4.	Mr. Khavkar Gururungappa	Asst. Professor	MSc(N) Psychiatry	2024	122284		6 months	02/06/2025	
5.	Mr. Manjunath Badiger	Asst. Professor	MSc(N) Paediatric	2025	213439	2405	Fresher	04/08/2025	
6.	Mr. Abhijith Mijajkar	Asst. Professor	MSc(N) CHN	2025	106846	2405	Fresher	04/08/2025	
7.	Mr. Dhareppa Badiger	Nsg. Tutor	BSc(N)	2020	106777	4405	-	01/11/2024	
8.	Mrs. Shashikala Masali	Nsg. Tutor	BSc(N)	2022	133231	2405	-	01/11/2024	
9.	Mrs. Praveen Pattar	Nsg. Tutor	BSc(N)	2022	133406	2405	-	08/08/2025	
10.	Mrs. Parvitra Badiger	Nsg. Tutor	BSc(N)	2022	136025	2405	-	03/12/2024	
11.	Mrs. Potadar Palani. S	Nsg. Tutor	PBBSc(N)	2023	240884	148	-	01/11/2024	
12.	Mr. Karthikkumar Teli	Nsg. Tutor	BSc(N)	2024	161213	148	-	03/02/2025	
13.	Mrs. Indira Madar	Nsg. Tutor	PBBSc(N)	2024	175121	148	-	05/02/2025	
14.	Mr. Mahesh Wadiyar	Nsg. Tutor	PBBSc(N)	2024	275858	Fresher	-	05/05/2025	
15.	Mrs. Naeini Bellad	Nsg. Tutor	BSc(N)	2024	Fresher	Fresher	-	02/06/2025	
16.	Mr. Shashidhar Tali	Nsg. Tutor	BSc(N)	2025	Fresher	Fresher	-	08/08/2025	
17.									
18.									
19.									
20.									
21.									
22.									

Signature of Chairperson

Signature of Member (1)

Signature of Member (2)

- **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
		- Details enclosed -			

14. Physical Facilities :

14.1. College Building:

Annexure - 12

S. No	Details	Required	Existing	Verified by LIC team
1	Built – up area of the building (in Sq. Ft) Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III-- section 4 published by authority, [Indian Nursing Council ; revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.) EC Copy/Rental Agreement registered copy	23,200sq.ft (40 – 60 intake)	23200sq.ft	
2	CLASSROOMS Size of each classroom (sq ft) for 40 to 60 intake B.Sc (N): 900 sq ft P.B.B.Sc (N) : 600 sq ft M.Sc (N) : 600 sq ft NPCC : 600sq ft	4 Class rooms 900sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each	3600sq.ft — — —	
3	Administrative Facilities Office 1. Principal's Chamber 2. Vice-Principal Chamber 3. HOD 4. Professor/Assoc. Prof 5. Lecturer/ Tutors Institution office /Others 6. Office of Administrative, clerical staff and PA (s) 7. Accountants Office 8. Store Room 9. Record room 10. Room for maintenance staff 11. Xeroxing room 12. common room (Girls & Boys)	 300 200 5 x 200 = 1000 800+2400= 3200 600 100 100 100 100 100 600+400= 1000	 300 200 1000 3200 600 100 100 100 100 100 1000	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

13. Multipurpose hall / Seminar hall/ examination hall	3000	3000	
14. Toilets	1000	1000	
15. A.V/Aids room	600	600	

S. No	Details	Required	Existing	Verified by LIC team
4	LABORATORIES	(40-60 intake)		
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1600sq.ft	
	Nutrition & Community Health Nursing	1200sq.ft	1200 sq.ft	
	Obstetrics and Gynecology Laboratory	900sq.ft	900sq.ft	
	Pediatrics Nursing Laboratory	900sq.ft	900sq.ft	
	Pre-Clinical Sciences Laboratory	900sq.ft	900sq.ft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500sq.ft	

Note:

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

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

Building Documents:

Annexure – 12

SL NO	Particulars	Verified by the LIC team
1	Registered documents in sub registrar office	
2	Is the college building own or leased ?	
3	Blue print of the building plan approved and attested by competent authority.	
4	Building construction license from competent authority	
5	Tax paid receipt (Latest / current year)	
6	Occupancy certificate.	
7	Sale deed / Lease deed of the building / Land.	
8	Land Conversion order from DC	
9	Town planning/Authorities approval order	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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
- If one of the trustee/member/directors 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 registered in sub registrar office. [Indian Nursing Council (revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021(F.NO. 11-1/2019-INC.)
- Google location of college to be attached by LIC team.
- Registered lease document in sub registrar office to be submitted.

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	KA28D1847	52	✓ Yes / No	✓ Yes / No	✓ Yes / No

16. Library facility :Enclose list of library books

Annexure - 14

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Verified by LIC team
Required 2300 Sq.Ft		YES ☒ No ☐	✓	✓	

Total No. of Nursing Books available	1000	No. of Nursing Journals subscribed	04
No. of Thesis/Research titles available	04	Is internet facility available for Students?	Yes
No of e-books	500	How many books were purchased in last financial year?	300

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Bhuvaneshwari Kaladagi	B.Lib	4 years	

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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

Annexure - 15

Academic activities	Particulars	Remarks
Research Projects		
Conferences conducted		
Conferences attended	Workshop on Effective Implementation of MLHP Curriculum. International conference on Revolution & role in HAI education, skill & Research	

* Colleges should declare & attest tobacco free/drugs free campus (self declaration from to be submitted)

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%)	Verified by LIC team
Full Name & Address of the Parent Hospital Yashoda Multispeciality hospital KHB Complex, Sadapur Road Vijayapur MOU(Registered parent hospital MOU)	100	5km		
NAME OF THE TRUST/ Person owning The Hospital Shri-Sangamesh Babalashwar				

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Name Of The Owner Of The Trust of Hospital <i>Dr. Raveendra Madraki</i>					
Affiliated hospital s- Full Name & Address of the Parent Hospital	1				
	2				
	3				
	(MOU/Clinical permission letter)				

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

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC)
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central/state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable. Other specialties/facilities for clinical experience required are:-OT, Eye/ENT, Burns & Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, ICU/CCU. (Reference :F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd 20/04/2018).
- With effect from 2022-23 AY, Nursing colleges for **Bangalore Urban and Mangalore city should have 200 bedded Unitary/Singleallopathic parent/own hospital.** This hospital should continue to function as parent hospital till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital to any other nursing institution and will be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.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.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Remarks:

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	25	80%		
Surgery including OT	25	85%		
Obstetrics & Gynecology	15	80%		
Pediatrics,	15	75%		
Emergency Medicine	15	85%		
Psychiatry	05	76%		

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	05	80%		
Minor OT	05	80%		
Dental, Otorhinolaryngology, Ophthalmology	04	75%		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Burns and Plastic	05	80%.		
Neonatology care unit	05	80%.		
Communicable disease/Respiratory medicine/TB & chest diseases	10	85%.		
Dermatology	10	80%.		
Cardiology	10	85%.		
Oncology	05	80%.		
Neurology/Neuro-surgery	10	80%.		
Nephrology/Urology	10	85%.		
ICU/CCU	10	80%.		
Geriatric Medicine	05	85%.		
Any other				

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

19	COMMUNITY HEALTH NURSING :Annexure - 17	
RURAL FIELD		
a. Name of CHC / PHC / SC	PHC	
Adopted / Affiliated	Adopted	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute	30km	
b. Services Rendered by Health & Family Welfare Programmes	Antenatal care, Immunization Under five care	
URBAN FIELD :		
a. Name of CHC / PHC / SC	PHC	
Adopted / Affiliated	Adopted	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute	4km	
b. Services Rendered by Health & Family Welfare Programmes	Immunization, Health education Nutritional program	
N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

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

h.	Extracurricular activities of students	YES	☒	NO ☐
i.	Cumulative record of each	YES	☒	NO ☐
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 ☐
s.	POSHE Committee	YES	☐	NO ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

t.	Prevention of Gender harassment committee	YES ☐	NO ☐
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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 6000 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 : 10	Boys : 15
f.	Total No. of rooms	Girls : 10	Boys : 10
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	Verified as per originals documents		Signature
		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 LibraryBooks & others			
Annexure - 15	Academic Activities			
Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate,			

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.			
Annexure - 17	Details of Community Health Nursing Posting Facilities			
Annexure - 18	Master Rotation plans and Time tables			
Annexure - 19	List of Teachers with their Declaration forms & necessary documents			
Annexure -20	RGUHS approved guideship letters of M.Sc Nursing faculty each speciality wise			

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.

LIC Team Observations:

LIC inspection of excellent college of nursing conducted on 12/08/2025. for continuation of affiliation for B.Sc. (N). On the day of inspection all the documents related to college building, hostels and vehicle details were verified. and are available according to university of INE norms. All the labs are well equipped with instruments, models, charts and library is equipped with Journals and latest edition textbooks with good internet connections. with a qualified librarian. The students are getting good clinical exposures as they have a 100 bedded parent hospital (Yashodha multispeciality hospital Wajypura) all the documents related to hospital is verified. Total number of staffs present in the college ~~are~~ are 16, all their documents were verified as per the norms.

Overall the functioning of the college is satisfactory and they are also maintaining proper records of the students and activities of college.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

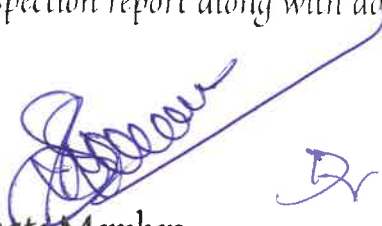
UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUIHS for conduct of LIC inspection at Excellent College of Nursing which has applied for continuation of affiliation for the academic year ~~2024-25~~ 2025-26.

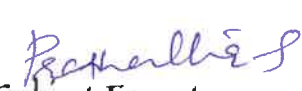
We have conducted LIC inspection of this college on 12/08/2025 and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUIHS vide ref no: RGUIHS/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.

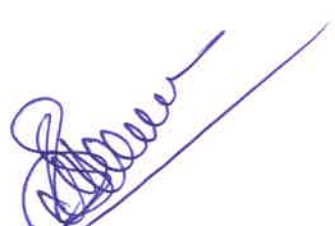
The information recorded by us in the LIC reports is true and correct.

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


Senate Member
(Chairman)


Dr. Sunil Dhaded
A C Member
(Member)


Subject Expert
(Member)


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

Instructions for reporting of Local inspections by RGUHS

1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.
2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which _____
 - a. Team shall compulsorily visit the attached hospital and physically verify the bed strength and facilities provided along with the KPMEA & PCB Certificates.
 - b. Team shall obtain an undertaking/affidavit from the hospital in the prescribed format.
3. Submission of softcopy of Video recording, geo tagged Photography during LIC inspection is mandatory.
4. The check list should have specific comments wherever applicable.
5. Report shall not use the words Adequate/Satisfactory/ available/sufficient etc. where the specific information is sought such as Area of the land/ Dimensions of class rooms/ number of teaching faculty/ number of class rooms/Laboratories /number of books etc. Such reports will be rejected directly without the approval.
6. All ORIGINAL documents mentioned in the checklist must be verified by the team before writing comments in the report.
7. After the verification of the original documents, photocopies of the same to be collected and the copies to be attested by the seal and signature of the Principal.
8. Original Land documents to be verified: 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)



सत्यमेव जयते

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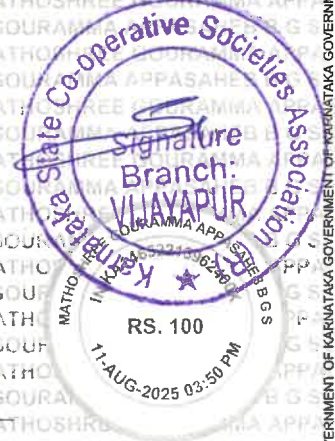
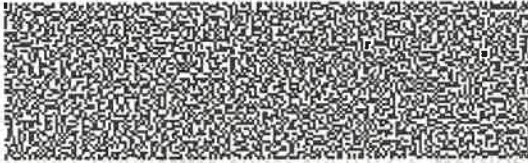
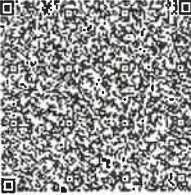
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e-Stamp



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 Unique Doc. Reference : SUBIN-KAKAKSCSA0844391534921167X
 Purchased by : MATHOSHREE GOURAMMA APPASAHEB B G S
 Description of Document : Article 4 Affidavit
 Property Description : AFFIDAVIT
 Consideration Price (Rs.) : 0
 (Zero)
 First Party : MATHOSHREE GOURAMMA APPASAHEB B G S
 Second Party : R G U H S BANGALORE
 Stamp Duty Paid By : MATHOSHREE GOURAMMA APPASAHEB B G S
 Stamp Duty Amount(Rs.) : 100
 (One Hundred only)

NOTARY
A.M. JAKANUR.
Reg.No: 12446
MY COMMISSION EXPIRE DATE: 06-01-2027

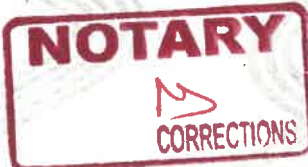


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11-AUG 2025

UNDERTAKING by Trust Management

We the Chairman of the trust Shri Sangamesh A Babaleshwar is submitting the affidavit to University.



Statutory Alert:

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

The trust Mathoshree Gouramma Appasaheb Babaleshwar Graminabhiruddi Samste's is running/managing the college Excellent College of nursing since 03 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 is 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.

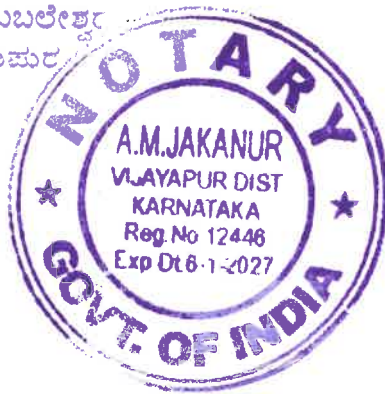
As prescribed from time to time.

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.

S.A. Babaleshwar .

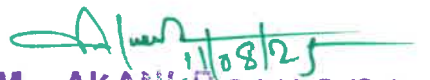
ಅಧ್ಯಕ್ಷರು

ಮಾತೋತ್ತಿ ಗೌರಮ್ಮ ಅಪ್ಪಾಸಾಹೇಬ ಬಬಲೇಶ್ವರ
ಗ್ರಾಮೀಣಾಭಿವೃದ್ಧಿ ಸಂಸ್ಥೆ, ವಿಜಯಪುರ



11 AUG 2025

EXECUTANTS DEPONENTS ADMITTING
CONTENTS SUPRA SIGNED SWORN
BEFORE ME HENCE ATTESTED


A. M. JAKANUR B.A.L.L.B. (Spl)
ADVOCATE & NOTARY
VIJAYAPUR KARNATAKA



सत्यमेव जयते

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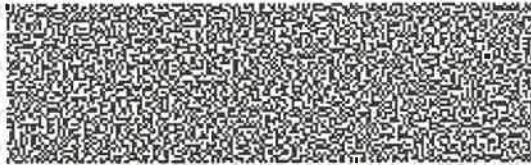
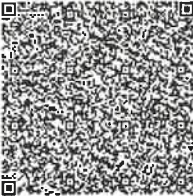
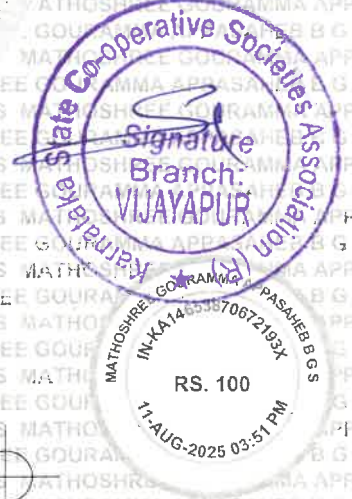
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 Purchased by : MATHOSHREE GOURAMMA APPASAHEB B G S
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 Stamp Duty Amount(Rs.) : 100
 (One Hundred only)

NOTARY
A. M. JAKANUR.
Reg.No: 12446
MY COMMISSION EXPIRE DATE: 06-01-2027



Please write or type below this line

UNDERTAKING

I, Dr Raveendra Madraki am the Owners/MD/CEO/Board Members of the
 Yashoda Multispecialty Hospital situated Vijayapur.



Statutory Alert:

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

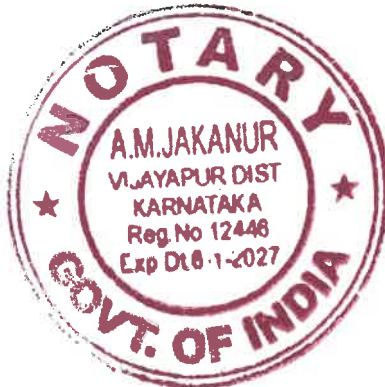
This is to confirm that our hospital BIJ00213ALSSH is registered under KPMEA and PCB with 100 beds and the bonafide certificate has been attached.

This is to confirm that the hospital Yashoda Multispecialty Hospital Vijayapur is functioning as parent hospital for Excellent College of Nursing Vijayapur.

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

The information provided by us is true and correct.

11 AUG 2025



EXECUTANTS DEPOSANTS ADMITTING
CONTENTS SUPRA SIGNED SWORN
BEFORE ME HENCE ATTESTED


A. M. JAKANUR B.A.L.L.B. (Spl)
ADVOCATE & NOTARY
VIJAYAPUR KARNATAKA