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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

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	DR. G MANJUNATH GOWDA	DR PADMA K BHAT	MRS ASHA KONNUR
Designation	CHIEF MEDICAL OFFICER	Prof. of public health dentistry	Asst. Professor of BLDEA
Address	MATRU-MULTI SPECIALITY HOSPITAL #91/2 11th MAIN KAMAKSHIPALYA BENGALURU – 560079	RAJARAJESHWARI DENTAL COLLEGE BENGALURU	BM PATIL INST OF NURSING SCIENCES VIJAYAPURA
Mobile No	9066679444	9886580298	8792183612
Email ID	manjunathgowda3141@gmail.com	padma549@gmail.com	

For the Academic Year : 2025-2026 *Date of Inspection:* 08/05/2025

(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	

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	CURA COLLEGE OF NURSING 16/1A, 3RD CROSS, KANAKA NAGAR R T NAGAR POST, HEBBAL, BENGALURU PIN 560 032	2	Year of Establishment: 2022
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary /Trust/Society /Company		
3	Name of the Trust & complete postal address (if private)	AMBARA EDUCATIONAL AND CHARITABLE TRUST 50/1 ASHRAY MOUNTAIN ROAD JAYANAGAR 1st BLOCK BANGALORE 560011 (Enclose copy of Registration documents of Society/Trust) Annexure – 1		
		Email: curainstitution@gmail.com	Website: www.curainstitutions.com	
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : 05 (Enclose copy ofGoverning Council Members & Audit report of Society/Trust) Annexure - 2		
5	Details of Principal/Head of the	Name: PINTO CHACKO Qualification: M.SC (N)	Mobile No: 7907514662 Office No: 9742100070	

Signature of Chairman
(DR. Manjunath Gowda)
8/5/25

Signature of Member (1)
8/5/25
(DR. PADMA K BHAT)
A. C-Member
RGUHS

Signature of Member (2)
(Mrs. Asha Konnur)
Subject expert
RGUHS

	institution	Experience: 14 YEARS 6 MONTHS Email: pintochackov@gmail.com		Fax No: Residential phone No:
6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☑	If yes, Specify the full name of the nursing institution with full address Verify with the original TRUST document. (Verify& enclose a copy of the registered trust Documents) Annexure – 3

7. Affiliation Fee Paid Details:

Annexure - 4

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UGor b) for UG and PG courses c) NPCC	
B.Sc. Nursing			Enclosed.			
Post Basic B.Sc. Nursing			NA			
					Total (A)	

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

Online Transaction Number or Details:

Remarks:

Verify &Enclose copy of Affiliation fee paid documents

8. Approval Status of the Institution &Sanctioned Intake:

Name of the	Intake Approved	GOK	RGUHS	KSNC	INC	Remarks

Signature of Chairman

Signature of Member (1) 28/5/25

Signature of Member (2)

Mrs. Asha Kennedy

Course	and Admitted					
Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake	40	40	40	40	
	Admissions Made for the Current Academic Year	16	16	16	16	
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		/ NA			
M.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake			/		
	Admissions Made for the Current Academic Year		/ NA			
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	/	NA			

Signature of Chairman

8/5/25

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	06	12	—	—	18
	Female	09	18	30	—	57
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--------
			N/A			

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--------
			N/A			

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)** 8/5/25 | **Signature of Member (2)** 8/5/25

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	20 to 60			40 to 60	61 to 100				40 to 60	61 to 100			
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*		03									
6	Tutor	8-16	16-24	2-10	--		08									
	Total	**16-24**	**24-40**	**4-12**			14									

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)
8/5/25

Signature of Member (2)
8/05/25

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

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience		Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
						After UG	After PG			
1.										
2.										
3.										
4.										
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21.										
22.										

Enclosed

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

8/5/25

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

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64.										
65.										

- **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.

8/5/25

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	26,000 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			
2	**CLASSROOMS** Size of each classroom (sq ft) for 40 to 60 intakeB.Sc (N): 900 sq ft	**4 Class rooms** 900sq ft Each	1000 Sq.ft	
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	NA	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	NA	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each	NA	
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	350 Sq.ft	
	2. Vice-Principal Chamber	200	250 Sq.ft	
	3. HOD	5 x 200 = 1000	1000 Sq.ft	
	4. Professor/Assoc. Prof	800+2400=3200	2000 Sq.ft	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		1000 Sq ft	
	7. Accountants Office		250 Sq ft	
	8. Store Room		1000 Sq.ft	
	9. Record room		500 Sq.ft	
	10. Room for maintenance staff		1000 Sq.ft	
	11. Xeroxing room		250 Sq.ft	
	12. common room	1000	1000 Sq.ft	
	13. Seminar hall	3000	3000 Sq.ft	
	14. Toilets	1000	2000 Sq.ft	
	15. A.V/Aids room	600	950 Sq.ft	

Signature of Chairman

Signature of Member (1)

8/5/25

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 Sq.ft	
	Obstetrics and Gynecology Laboratory	900sq.ft	1000 Sq.ft	
	Pediatrics Nursing Laboratory	900sq.ft	1000 Sq.ft	
	Pre-Clinical Sciences Laboratory	900sq.ft	1000 Sq.ft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500 Sq.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)

Annexure - 12

Building Documents:

S. No	Particulars	Status	Tick Mark	Status	Tick Mark
1.	Is the Institution	Owned	✓	Rent /Lease	
2.	Building Tax paid receipt/ certificate by Authority	Produced & Enclosed	✓	Not Produced & Not Enclosed	
3.	Land deed to be attached	Produced & Enclosed	✓	Not Produced & Not Enclosed	
4.	Does all the courses are imparted in this building	YES	✓	NO	
5.	Whether Safe drinking water supply in available	YES	✓	NO	

Note:

- If the institution doesn't have own building even after 2016 withdrawal of affiliation will be initiated. .(F.NO.1-5/2014-INC dtd 29/10/2014).
- It is mandatory that **all nursing institution** shall have its own building within two years of its establishment **2021-22 onwards.**
- If one of the trustee/member/director of the Trust/Society/Company desires to lease the building owned by him for nursing program, it should be for a period of 30 years. [Indian Nursing Council (revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)
- Google location of college to be attached by LIC team.

15. Vehicle Details : Enclose a copy of RC Book / Insurance / Driving License

Annexure - 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licience
01	KA53AB4177	32	~~Yes~~ / No	~~Yes~~ / No	~~Yes~~ / No

16. Library facility : Enclose list of library books

Annexure - 14

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

8/5/25

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Remarks
Required 2300 Sq.Ft	8000 Sq.ft	YES ☑ No ☐	✓	✓	

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

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01	HARISHA P	Master in library Science	15 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	Enclosed	
Conferences conducted		
Conferences attended		

18. Details of Clinical / Hospital Facilities : Enclosed

Annexure - 16

Signature of Chairman

Signature of Member (1)
8/5/25

Signature of Member (2)
8/05/25

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 CURA HOSPITAL		200	4.3 KM	80 %	
NAME OF THE TRUST/ Person owning The Hospital AMBARA EDUCATIONAL AND CHARITABLE TRUST					
Name Of The Owner Of The Trust MRS SAVITHA K GOWDA					
Affiliated hospitals-Full Name & Address of the Parent Hospital	1 VAGUS SUPER SPECIALITY HOSPITAL	150	8.4 KM	85 %	
	2 CURA HOSPITALS	100	21 KM	90 %	

(Mention the number of beds, verify the original documents of proof regarding the ownership of hospital and the number of beds with KPMEA and Pollution control board certificate).

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 2021, Nursing collegesshould have 100 bedded Unitary/Single allopathic parent/own hospital**except forBangalore Urban and Mangalore city which 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, 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.)

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

8/5/25 | 8/05/25

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

Enclosed

Additional/Other Specialties/Facilities for clinical experience:

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

Enclosed

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

19	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	

Signature of Chairman

Signature of Member (1)

8/5/25

Signature of Member (2)

8/05/25

Note ;

- Maximum of 60 seats will be sanctioned for the institution with parent hospital having less than 300 beds on the basis of teaching and physical facilities for B.Sc. (Nursing) program.
- Maximum of 100 seats will be sanctioned for the B.Sc. (Nursing) program for which institute must have parent Medical College or parent hospital having 300 beds or above. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.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:

18.1. Distribution of Beds

Clinical Areas	Parent	Affiliated

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

8/5/25 8/05/25

Adopted / Affiliated	
Administrate red by	State Govt. ☐ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	
b. Services Rendered by Health & Family Welfare Programmes	Enclosed
URBAN FEILD :	
a. **Name of CHC / PHC / SC**	
Adopted / Affiliated	Enclosed
Administrate red by	State Govt. ☐ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	
b. Services Rendered by Health & Family Welfare Programmes	
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 ☐
h.	Extracurricular activities of students	YES ☑	NO ☐
i.	Cumulative record of each	YES ☑	NO ☐
j.	Course planning of each subject	YES ☑	NO ☐

Signature of Chairman

Signature of Member (1) 8/5/25

Signature of Member (2) 8/05/25

	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 30,000 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 : 55	Boys : 18
f.	Total No. of rooms	Girls : 20	Boys : 15
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 ☐

List of Annexures:

Annexure Numbers	Details	Submitted (Tick Mark)	
		Yes	NO

Signature of Chairman

Signature of Member (1) 8/5/25

Signature of Member (2) 8/05/25

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 : College Building, Laboratories and Building related documents, 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	✓	
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	✓	

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:

Signature of Chairman

Signature of Member (1) 8/5/25

Signature of Member (2) 8/05/25

Observations:

- The institution was started in the year 2022.
- The LIC visited the college on 8th May, 2025. On the day of inspection, Principal and faculty were present as per ratio.
- The infrastructure of the college has been considered clinical materials can be considered for the continuation of affiliation, enhancement of seats Rsc N 40-60.
- Affiliated hospitals documents needs to be verified.
- If found satisfactory, can be considered for 100 intake.

Signature of Chairman
8/5/25

Signature of Member (1)
8/5/25
(Dr-PADMA·K·BHAT)

Signature of Member (2)
8/5/25

CURA COLLEGE OF NURSING

Teaching Faculty Details

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Qualified Institution Name	Year of passing	KSNC Reg.Number	Date Of Birth	Teaching experience		Date of joining	SIGNATURE
								After UG	After PG		
1.	MR. PINTO CHACKO	PRINCIPAL	MSC(N), Psychiatric Nursing	Sneha College Of Nursing	2012	29396	07/10/ 1986	1 year 6 months	13 years	03/08/ 2022	
2.	MRS. PRIYANKA ROY	VICE PRINCIPAL	MSC(N), Medical Surgical Nursing	Little Flower College Of Nursing	2013	KRL 2014 4330 KAR	30/05/ 1987	1 Year	11 years	01/02/ 2024	Maternity Leave
3.	MS. SUJITHA. A	ASSISTANT PROFESSOR	MSc (N) Psychiatric Nursing	Sree Abhirami College Of Nursing	2020	192060	06/02/ 1994	1 year	4 years 4 months	16/11/ 2023	
4.	MR. NIJO VARGHESE	LECTURER	MSC(N) Peadiatric Nursing	Chinai College Of Nursing	2023	6390	27/01/ 1983	4 years	2 years 2 months	01/03/ 2023	
5.	MRS. ANNU SEBASTIAN	LECTURER	MSC(N) Obstetric & Gynecological Nursing	Chinai College Of Nursing	2023	KL03201500 033	08/01/ 1990	4 years	2 years	01/07/ 2023	
6.	MS. ANU ANAND	LECTURER	MSC(N) Peadiatric Nursing	Ranebennur College Of Nursing	2023	69742	09/10/ 1995	3 years	2 years	01/07/ 2023	
7.	MS. RENI ROY	ASSSISTANT LECTURER	BSC(N)	Faith Institute Of	2017	90478	29/12/ 1990	2 years	-	03/02/ 2023	

				Nursing Sciences				3 months			
8.	MR. PRAJWAL P	ASSSISTANT LECTURER	BSC(N)	Bangalore City College Of Nursing	2023	145125	17/04/ 2000	2 years	-	03/05/ 2023	
9.	MS. ANUSHA P E	ASSSISTANT LECTURER	BSC(N)	Government College Of Nursing Hassan	2021	120479	22/02/ 1999	2 years	-	03/05/ 2024	
10.	MS. SANDRA SIBY	ASSSISTANT LECTURER	BSC(N)	S j e s college of nursing	2023	157180	18/07/ 2001	1 year	-	05/09/ 24	
11.	MS.KEZIA C LAST	ASSSISTANT LECTURER	BSC(N)	Mother Theresa college of nursing	2023	RR KRL 2024 25235 KAR	16/10/ 1994	-		02/04/ 25	
12.	MS. HANEEFA S DARWIN	ASSSISTANT LECTURER	BSC(N)	SJES college of nursing	2023	157102	18/10/ 2001	-	-	02/04/ 25	
13.	MS.SAPNA CHETRI	ASSSISTANT LECTURER	PB BSC(N)	FLORENCE college of nursing	2024	231719	03/12/ 1993	-	-	02/04/ 25	
14.	MS. CANDU T	ASSSISTANT LECTURER	BSC(N)	ESI Corporation college of nursing	2024	170866	02/07/ 2003	-	-	22/04/ 25	