



Rajiv Gandhi University of Health Sciences, Karnataka

4th 'T' Block Jayanagar, Bangalore – 560041

Website: www.rguhs.ac.in Phone: 080-26761933

32

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. Kiran Kumar	V.R. Ayyappa	Dr. Dananagouda H.V.
Designation	Associate Professor	Professor	Professor
Address	SKMCH ERG No.10, Pipeline road Vijayanagar, Bangalore	Sanjay Gandhi Inst of Trauma & Physiotherapy - Bangalore	Navodaya C.O.N - Raichur
Mobile No	9481965646	9886291325	7204252918
Email ID	dr.kiranayur@gmail.com	Ayyappa28@gmail.com	dananagouda@gmail.com

For the Academic Year : 2025 - 26.

Date of Inspection: 09/08/25.

(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	Ashoka Institute of Nursing Sciences Rajnagar - Hubballi - 580032	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	Global Tatwadasha Educational Trust Ganesh Colony, Nekar Nagar - Hubli 580024. (Enclose copy of Registration documents of Society/Trust) Annexure - 1			
		Email: principalaians@gmail.com	Website:		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Dr. Dananagouda
9/8/2025

	(b). Name of the Owner of Trust/Society	Shri. Prabhakar V. Belageri.		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 04. (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	Details of Principal/Head of the institution	Name: Shobha Kundagol Qualification: M.Sc Nursing. Experience: 15yrs. Email:		Mobile No: 7760578035 Office No: 9740624699 Fax No: Residential phone No: 7760578035
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 or b) for UG and PG courses c) NPCC	
B.Sc. Nursing	1,30,000/-	Application form fees- 1,000/-			25,000/-	1,56,050/-
Post Basic B.Sc. Nursing						
Total (A)						1,56,050/-
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation		No of Seats X Prescribed fees of each faculty			
	1.					
	2.					
	3.	— Not Applicable —				
	4.					
	5.					
					Total (B)	
NPCC						
					Total (C)	
Grand Total (A+B+C)						

Online Transaction Number or Details:

Transaction ID → BD00000007567587, Payment Ref. No → ZSB17030967YUY

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	MED 502 MSF 2022 26/12/2022 Annexure - 5	RGUHS AFFI FR/N5781 2022-2023 26/12/22 Annexure - 6	KSNC: 2131 2022-23 09/01/2023 Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake	40	40	40	40	
	Admissions Made for the Current Academic Year	39				
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	—	Not Applicable			
	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	—	Not Applicable			
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	—	Not Applicable			

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.Sc Nursing	Male	13	09	03		
	Female	26	30	28		
Post Basic B.Sc Nursing	Male		Not	Applicable		
	Female					
M.Sc Nursing	Male					
	Female		Not	Applicable		
M.Sc NPCC	Male					
	Female		Not	Applicable		

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-----

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-----

Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

Ref: F.No.1-6/LT/2022-INC dtd 23.03.2022&RGU/ADM/CIR/01/2017-18 dtd 25.03.2017

Remarks: _____

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

12. Teaching Faculty Requirements for all Nursing Programs:

Sl. No	Designation	Required					Existing / Available					Deficit				
		B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)*	M.Sc NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	NPCC	B.Sc (N)		P.B. B.Sc (N)	M.Sc (N)	M.Sc NPCC
		40 to 60	61 to 100	20 to 60			40 to 60	61 to 100				40 to 60	61 to 100			
1	Principal	1	1				1									
2	Vice-Principal	1	1				1									
3	Professor	1	1-2		1*		—					1				
4	Associate Professor	2	2-4		1*		2					0				
5	Assistant Professor	3	3-8	2	3*		1					2				
6	Tutor	8-16	16-24	2-10	--		15					0				
	Total	16-24	24-40	4-12			20									

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)

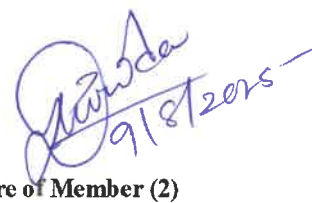
Year Wise Distribution of Faculty for B.Sc Nursing :

(Start the Program i.e, for 1st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)

Intake	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
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)

Teaching Faculty Details

Sl.N	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNCRg. Number	Teaching		Date of joining	Form - 16 Submitted (Yes/No)	Signature of Faculty
						After UG	After PG			
0										
1	Mrs. Shobha Kundagol	Principal	M.Sc Nursing (Obstetrics and Gynecological	2007	15774	1 Year	16 Years	01-02-2025	Salary Certificate	
2	Mrs. Suma K	Vice Principal	M.Sc Nursing (Medical Surgical Nursing)	2020	22440	14 Years	5 years	01-09-2022	Bank Statement	
3	Mr. Ramalingappa Sajjanar	Assistant Professor	M.Sc Nursing (Peadtric Nursing)	2021	180685	1 Year	4 Years	01-02-2025	Salary Certificate	
4	Mr. Mudakappa Chavadavannavar	Assistant Professor	M.Sc Nursing (Community Health Nursing)	2023	101584	5 Years	2 Years	02-11-2024	Salary Certificate	
5	Mrs. Soubhagya	Lecture	M.Sc Nursing (Psychiatric Nursing)	2024	114248	1 Year	1 Year	01-01-2025	Salary Certificate	
6	Mr. Mahesh Pawar	Nursing Tutor	PB.B.Sc Nursing	2012	111903	13 Years		01-12-2022	Salary Certificate	
7	Mr. Manjunath Golappanavar	Nursing Tutor	B.Sc Nursing	2019	132197	6 Years		01-12-2022	Salary Certificate	
8	Mr. Ravikumar Savmshi	Nursing Tutor	B.Sc Nursing	2019	136074	6 Years		01-04-2023	Salary Certificate	
9	Ms. Maya	Nursing Tutor	PB.B.Sc Nursing	2019	213625	6 Years		05-08-2022	Salary Certificate	
10	Mr. Gopal Sutar	Nursing Tutor	PB.B.Sc Nursing	2020	106885	5 Years		01-12-2022	Salary Certificate	
11	Mr. Mohammad Hazala	Nursing Tutor	B.Sc Nursing	2021	132193	4 Years		02-05-2023	Salary Certificate	
12	Ms. Sneha Gokavi	Nursing Tutor	B.Sc Nursing	2023	150277	2 Years		31-10-2023	Salary Certificate	
13	Ms. Pooja Gokak	Nursing Tutor	B.Sc Nursing	2023	148320	1 Year		02-11-2024	Salary Certificate	
14	Ms. Jena Adapur	Nursing Tutor	B.Sc Nursing	2023	148188	1 Year		13-12-2024	Salary Certificate	

V.R. Mohan

10/11

15	Ms. Deepa Sangolli	Nursing Tutor	B.Sc Nursing	2023	148185	1 Year		17-12-2024	Salary Certificate	<u>Deepa</u>
16	Mr. Yallappa Koli	Nursing Tutor	B.Sc Nursing	2024	180226	8 Months		01-04-2025	Salary Certificate	<u>Y.K.</u>
17	Ms. Prema Palled	Nursing Tutor	B.Sc Nursing	2024	179893	8 Months		08-04-2025	Salary Certificate	<u>P.</u>
18	Ms. Anjana Gouli	Nursing Tutor	B.Sc Nursing	2024	172223	8 Months		17-04-2025	Salary Certificate	<u>A.</u>
19	Ms. Julekhabhi Sayed	Nursing Tutor	PB.B.Sc Nursing	2024	279227	8 Months		21-04-2025	Salary Certificate	<u>J.S.</u>
20	Ms. Chaitra Gangavati	Nursing Tutor	B.Sc Nursing	2024	171677	8 Months		01-02-2025	Salary Certificate	<u>C.</u>

9/8/25

V.P. Hoppa

Dr. Dananagouda H
9/8/2025

,

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

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

14. Physical Facilities : Enclosed

14.1. College Building: Enclosed

Annexure - 12

S. No	Details	Required	Existing	Remarks
1	Built – up area of the building (in Sq. Ft)	23,200sq.ft	30,000 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 intake B.Sc (N): 900 sq ft	4 Class rooms 900sq ft Each	912.2 sq.ft each	
	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	254 sq.ft	
	3. HOD	5 x 200 = 1000	800 sq.ft	
	4. Professor/Assoc. Prof	800+2400=3200	560 sq.ft	
	5. Lecturer/ Tutors			
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)		600 sq.ft	
	7. Accountants Office		560 sq.ft	
	8. Store Room		540 sq.ft	
	9. Record room		450 sq.ft	
	10. Room for maintenance staff		400 sq.ft	
	11. Xeroxing room		300 sq.ft	
	12. common room	1000	1060 sq.ft	
	13. Seminar hall	3000	3075 sq.ft	
	14. Toilets	1000	1000 sq.ft	
	15. A.V/Aids room	600	600 sq.ft	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

S. No	Details	Required	Existing	Remarks
4	LABORATORIES			
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1652. Sq.ft	
	Nutrition & Community Health Nursing	1200sq.ft	1800 Sq.ft	
	Obstetrics and Gynecology Laboratory	900sq.ft	1395. Sq.ft	
	Pediatrics Nursing Laboratory	900sq.ft	9008.2sq.ft	
	Pre-Clinical Sciences Laboratory	900sq.ft	900 Sq.ft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1540 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)

Building Documents:

Annexure – 12

1. Is the college building own or leased / rented?
2. Blue print of the building attested by competent authority.
3. Tax paid receipt (Latest / current year)
4. Occupancy certificate.
5. Sale deed / Lease deed of the building / Land.

It is mandatory to enclose all the documents mentioned above.

Note:

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

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

Annexure – 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licience
01	KA63A2791	54	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	2400	YES ☒ No ☐	Good	Good .	
Total No. of Nursing Books available		2698 .	No. of Nursing Journals subscribed		06
No. of Thesis/Research titles available			Is internet facility available for Students?		Yes .
No of e-books			How many books were purchased in last financial year?		280

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01.	Nanda .K .B	M. Lib.	4 yrs .	

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 will increase/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	— Not Applicable —	
Conferences conducted	— Not Applicable —	
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 <i>Ashoka Hospital. A Unit of AB & H Ventures Behind Amruth Theatre, M.T.S. Nidhynagar Hubli 580021.</i>	<i>100</i>	<i>1km</i>	<i>90%.</i>	
NAME OF THE TRUST/ Person owning The Hospital <i>A Unit of AB & H Ventures Dr. Ashok V. Bangarshettar.</i>				
Name Of The Owner Of The Trust of Hospital <i>Dr. Ashok V. Bangarshettar</i>				
Affiliated hospitals- Full Name & Address of the Parent Hospital	1			
	2			

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

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC).
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central /state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable. Other specialties/facilities for clinical experience required are;-OT, Eye/ENT, Burns & Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, ICU/ICCU. (Reference :F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd 20/04/2018).
- With effect from 2022-23 AY, Nursing colleges **for Bangalore Urban and Mangalore city should have 200 bedded Unitary/Single allopathic parent/own hospital**. This hospital should continue to function as parent hospital till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital to any other nursing institution and will

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 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.

Remarks:

→ on the day of Engalton
all documents verified and
attached


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	05	80%.		
Surgery including OT	09	90%.		
Obstetrics & Gynecology	10	70%.		
Pediatrics,	04	80%.		
Emergency Medicine	04	85%.		
Psychiatry	02	80%.		

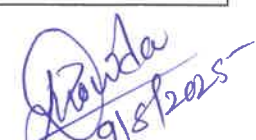
Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	08	98%.		
Minor OT	06	95%.		
Dental, Otorhinolaryngology, Ophthalmology	02	92%.		
Burns and Plastic	02	89%.		
Neonatology care unit	05	90%.		
Communicable disease/ Respiratory medicine/TB & chest diseases	04	85%.		
Dermatology	04	85%.		
Cardiology	10	90%.		
Oncology	10	95%.		
Neurology/Neuro-surgery	06	92%.		
Nephrology/Urology	02	92%.		
ICU/CCU	05	95%.		
Geriatric Medicine	02	90%.		
Any other				

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)

RURAL FILELD

a. Name of CHC / PHC / SC	Adiragunchi, PHC.
Adopted / Affiliated	Affiliated.
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	10km.
b. Services Rendered by Health & Family Welfare Programmes	Maternal & child health, family planning, ANC care, Nutrition Education, Under 5 care etc.

URBAN FEILD :

a. Name of CHC / PHC / SC	
Adopted / Affiliated	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	
b. Services Rendered by Health & Family Welfare Programmes	Women Care, child Immunization, Growth Monitor Antenatal care, Maternity services, Family planning

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	- NA -	YES	☐	NO	☒
c.	M.Sc. Nursing	- NA -	YES	☐	NO	☒
21	Time Table available for all Nursing Programmes					
a.	Basic B.Sc. Nursing	YES	☒	NO	☐	
b.	Post Basic B.Sc. Nursing	- NA -	YES	☐	NO	☒
c.	M.Sc. Nursing	- NA -	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 30-150 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 : 66	Boys : 12
f.	Total No. of rooms	Girls : 36.	Boys : 06.
g.	Water Supply	YES ☒	NO ☐
h.	Electricity Supply	YES ☒	NO ☐
i.	Is Facilities available for outdoor games and indoor games?	YES ☒	NO ☐
j.	Is Sick room available?	YES ☒	NO ☐
k.	Whether the hostel mess is available with	YES ☒	NO ☐
l.	Safe drinking water facilities	YES ☒	NO ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

List of Annexures:

Annexure Numbers	Details	Submitted (Tick Mark)	
		Yes	NO
Annexure - 1	Details of Trust/ Society related documents	✓	
Annexure - 2	Details of Governing Council, its meetings & Audit report of Trust	✓	
Annexure - 3	Details of any other Nursing Institution under the same Trust	✓	✓
Annexure - 4	Details of Affiliated fees paid receipts	✓	
Annexure - 5	Approval Status : GOK Order	✓	
Annexure - 6	Approval Status : RGUHS Notification (Last 3 Years) Approval	✓	
Annexure - 7	Approval Status : KNC Notification	✓	
Annexure - 8	Status : INC Notification	✓	✓
Annexure - 9	List of Post Basic B.Sc. Nursing Students as per format	✓	✓
Annexure - 10	List of M.Sc. Nursing Students as per format	✓	✓
Annexure - 11	Details of External /Part time Teachers	✓	
Annexure - 12	Physical Facilities : 1. College Building- Own /rent /lease MOU documents, Sale deed, current year tax paid receipt, sanctioned building plan by competent authority, occupancy certificate, building accessibility-lift/ Rampin working condition, 2. Laboratories 3. Building related documents 4. Hostel	✓	
Annexure - 13	Vehicle Details : Bus	✓	
Annexure - 14	Details of List of Library Books & others	✓	
Annexure - 15	Academic Activities	✓	
Annexure - 16	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.	✓	
Annexure - 17	Details of Community Health Nursing Posting Facilities	✓	
Annexure - 18	Master Rotation plans and Time tables	✓	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Annexure - 19	List of Teachers with their Declaration forms & necessary documents	✓	
Annexure - 20	RGUHS approved guideship letters of M.Sc Nursing faculty each speciality wise		

Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations:

On the day of Inspection, LIC committee made following observations

- Infra structure built in 30000 sq feet area contains 6 labs, 4 classrooms. Library & required nursing curriculum
- 20 teaching faculties were appointed including principal & all are posted
- Library having 2698 books and 280 new books were added in last financial year
- Institution has parent hospital, i.e. Acharya Hospital which is 1 km away from the institution with good number of patient flow in OPD & IPD
- Institution is recognised in Bar. Regd.
- Vehicle facility, separate hostel for boys & girls available
- All documents verified -

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 Dehoka Institute of Nursing Sciences which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on _____ and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

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

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

**Senate Member
(Chairman)**

**A C Member
(Member)**

**Subject Expert
(Member)**

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

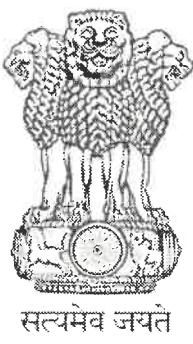
Instructions for reporting of Local inspections by RGUHS

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)

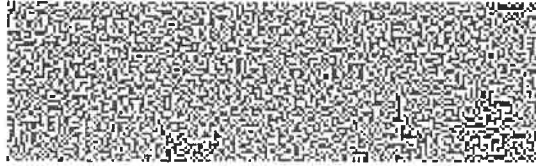
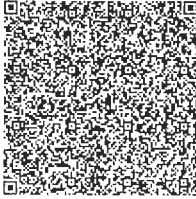


INDIA NON JUDICIAL

Government of Karnataka

e-Stamp

Certificate No. : IN-KA11558976737518X
Certificate Issued Date : 07-Aug-2025 10:33 AM
Account Reference : NONACC (FI)/ kaksfcl08/ HUBLI3/ KA-DW
Unique Doc. Reference : SUBIN-KAKAKSFCL0838526286679273X
Purchased by : ASHOKA MULTISPECIALITY HOSPITAL HUBLI
Description of Document : Article 4 Affidavit
Property Description : AFFIDAVIT
Consideration Price (Rs.) : 0
(Zero)
First Party : ASHOKA MULTISPECIALITY HOSPITAL HUBLI
Second Party : REGISTRAR EVALUATION RGUHS
Stamp Duty Paid By : ASHOKA MULTISPECIALITY HOSPITAL HUBLI
Stamp Duty Amount(Rs.) : 100
(One Hundred only)



Please write or type below this line

UNDERTAKING

I/We, Dr. Ashok Bangar Shettar are the owner/MD/Board member of the Ashoka Multispecialty hospital situate at Vidyanagar behind amrut theatre



Aus
No. of Corrections
107 8
NOTARY

Disclaimer

1. The authenticity of the e-stamp certificate should be verified at www.stampservices.com or using e-Stamp Mobile App of Stamp Services.
2. Any discrepancy in the details on the Certificate and its validity on the website / Mobile App should be notified.
3. The date of expiry of the validity is on the date of the certificate.
4. In case of any discrepancy, please inform the Competent Authority.

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

This is to confirm that the hospital Ashoka Multispecialty functioning as affiliated/parent/own hospital for Ashoka Institute of Nursing college.

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

The information provided by us is true and correct.



Dr. Ashok V. Bangarashettar MS (Ortho)

Managing Partner
ASHOKA HOSPITAL



ASHOKA HOSPITAL
(A Unit of AB & H Ventures)
Behind Amruth Theatre M.T.S.
Vidyanagar, HUBLI-580021.

U.A. Jeyaraj

ASHOKA HOSPITAL
(A Unit of AB & H Ventures)
Behind Amruth Theatre M.T.S.
Vidyanagar, HUBLI-580021.



No. of Corrections
NA

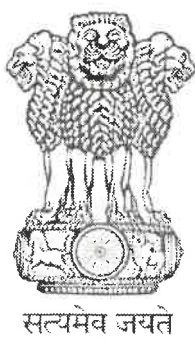
NOTARY

SOLEMNLY AFFIRMED BEFORE ME



NOTARY

09 AUG 2025

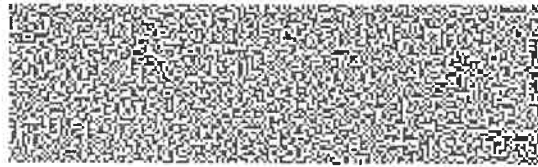
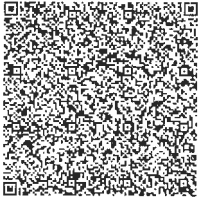


INDIA NON JUDICIAL

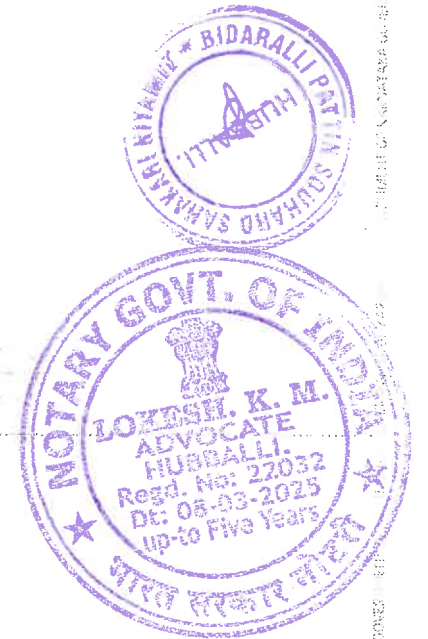
Government of Karnataka

e-Stamp

Certificate No. : IN-KA11557254964337X
Certificate Issued Date : 07-Aug-2025 10:32 AM
Account Reference : NONACC (FI)/ kaksfcl08/ HUBLI3/ KA-DW
Unique Doc. Reference : SUBIN-KAKAKSFCL0838522515230393X
Purchased by : CHAIRMAN GLOBAL TATWADRSHA EDUCATIONAL TRUST
Description of Document : Article 4 Affidavit
Property Description : AFFIDAVIT
Consideration Price (Rs.) : 0
(Zero)
First Party : CHAIRMAN GLOBAL TATWADRSHA EDUCATIONAL TRUST
Second Party : REGISTRAR EVALUATION RGUHS
Stamp Duty Paid By : CHAIRMAN GLOBAL TATWADRSHA EDUCATIONAL TRUST
Stamp Duty Amount(Rs.) : 100
(One Hundred only)



Please write or type below this line



Undertaking by Trust Management

We the Chairman/President/Secretary/Member of the Trust Mr. Prabhakar V Betageri are submitting the affidavit to University. The Trust Global Tatwadarsha Educational Trust is running/managing the college Ashoka Institute of Nursing Sciences since 3 Years.

No. of Corrections

Statutory Alter

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

NOTARY

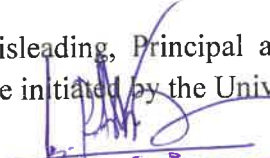
We confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge.

We confirm that the faculty in the college are employed for full time in the college.

We also confirm that the college is solely managed by the trust 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.


PRESIDENT
GLOBAL TATWADARSHA
EDUCATIONAL TRUST (R).
HUBBALLI-580 024.
Dist: DHARWAD, (KARNATAKA).


VICE-PRESIDENT
GLOBAL TATWADARSHA
EDUCATIONAL TRUST (R).
HUBBALLI-580 024.
Dist: DHARWAD, (KARNATAKA).




SECRETARY
GLOBAL TATWADARSHA
EDUCATIONAL TRUST (R).
HUBBALLI-580 024.
Dist: DHARWAD, (KARNATAKA).

No. of Corrections


NOTARY

SOLEMNLY AFFIRMED BEFORE ME


NOTARY

09 AUG 2025