Rajiv Gandhi University of Health Sciences, Karnataka
4th 'T' Block Jayanagar, Bangalore – 560041
Website: www.rguhs.ac.in Phone: 080-26761933

INSPECTION PROFORMA FOR NURSING 2025-26 AY

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. Nandish J	Prof. Mohd. Aleemuddinquamri	Dr. Netravathi. V
Designation	Principal	Chairman of BOS Unani PG Professor	Principal
Address	Aishwarya Institute Of Nursing Science, Maddur	National Institute of Unani Medicine	Dr BR Ambedkar Institute of Nursing, # 24, Dr. B R Ambedkar Medical and hospital campus, Bangalore-560045
Mobile No	9845471377	9341072974	9886478535
Email ID	Nandeesh.aips@gmail.com	drmaquamri@gmail.com	Netrareddy28@gmail.com

Inspection For the Academic Year :2025-26			*Date of Inspection: 10-08-2025*	
(Please Tick the Appropriate Boxes Below)				
Type of Inspection:	1.Fresh Affiliation	NA	4. Re-Inspection	NA
	2.Continuation of Affiliation	✓	5.Surprise Inspection	NA
	3.Enhancement of Seats	NA	6. Change of Name/Address	NA
	7. Additional Course (M.Sc Nursing) only.	NA		

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

1	Name of the Institution with Full Address	THE BANGALORE SOCIAL AND EDUCATIONAL COLLEGE OF NURSING	2	Year of Establishment 2003
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	THE BANGALORE SOCIAL AND EDUCATIONAL ASSOCIATION ENCLOSED (Enclose copy of Registration documents of Society/Trust)**Annexure – 1**		

Signature of Chairman 10/08/25 (Dr. Nandeesh. J)

Signature of Member (1) 10/8/25 MOHD. ALEEMUDDIN QUAMRI

Signature of Member (2) 10/8/25 Dr. NETHRAVATHI. V

	address& Phone number	Email:bsecollege@gmail.com	Website: NA
		Office No:08022552255	Mobile No:9538603500
	(b). Name of the president/Secretary/ Chairman of Trust/Society & Phone No	TOJO JOHN 9886644444	
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : 4 (Enclose copy ofGoverning Council Members & Audit report of Society/Trust)**Annexure - 2**	
5	a) Details of Principal/Head of the institution (After MSc)	Name: BHAVYA Y Qualification:MSc (N) Experience after MSc: 15 Email:	Mobile No:9538603500 Office No:08022552255 Fax No: Residential phone No:
	b) Drawing authority of the college	TOJO JOHN	

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	Continuation	-	221050	-	-	ZHMPASA0966BV1 221050
Post Basic B.Sc. Nursing	NA	NA	NA	NA	NA	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.					
	4.					
	5.					
					Total (B)	
NPCC						

NA

Signature of Chairman

Signature of Member (1) 10/8/25

Signature of Member (2) 10/8/25

		Total (C)	
		Grand Total (A+B+C)	221050

Online Transaction Number or Details:

Remarks: Verified the fees paid receipts.

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	HFW 342 MPS 2003 Annexure - 5	NF102 Annexure - 6	KNC /1157-V-5-(45)Annexure - 7	ENCLOSED Annexure - 8	Verified the notifications of RGUHS, KNC and INC and also GOK orders.
	Affiliation Sanctioned Intake	60	60	60	40	
	Admissions Made for the Current Academic Year	53	53	53	53	
Post Basic B.Sc. Nursing — NA —	Approval Letter No. and Date	Annexure - 5	Annexure – 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	NA	NA	NA	NA	
	Admissions Made for the Current Academic Year	NA	NA	NA	NA	
M.Sc. Nursing in a. Community Health ☐ b. Medical Surgical ☐ c. OBG ☐ d. Paediatric ☐ e. Psychiatry ☐ — NA —	Approval Letter No. and Date	Annexure - 5	Annexure – 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	NA	NA	NA	NA	
	Admissions Made for the Current Academic Year	NA	NA	NA	NA	

10/8/25 10/8/25

M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure – 6	Annexure - 7	Annexure - 8	
	Sanctioned Intake	NA	NA	NA	NA	
	Admissions Made for the Current Academic Year	NA	NA	NA	NA	

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	18	19	17	19	73
	Female	35	37	17	35	124
Post Basic B.Sc Nursing	Male	NA	NA	NA	NA	NA
	Female	NA	NA	NA	NA	NA
M.Sc Nursing	Male	NA	NA	NA	NA	NA
	Female	NA	NA	NA	NA	NA
M.Sc NPCC	Male	NA	NA	NA	NA	NA
	Female	NA	NA	NA	NA	NA

10. If the college has PBBSc(N) following details of the admitted students to be enclosed (physical verification to be done with original documents)

Annexure - 9

Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From------ To---------
	NA	NA	NA	NA	NA	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	NA	NA	NA	NA	NA

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

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

10/08/25

Remarks: Nil

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	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*				1					
4	Associate Professor	2	2-4					1*				3					
5	Assistant Professor	3	3-8				2	3*				2					
6	Tutor	8-16	16-24				2-10	--		18							
	Total	**16-24**	**24-40**				**4-12**					**26**					

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	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

Signature of Chairman **Signature of Member (1)** 10/8/22 **Signature of Member (2)** 10/8/22

	Total 10 Faculty	Total 20 Faculty	Total 30 Faculty	Total 40 Faculty
100 Students Intake	* 5 M.Sc. Nursing qualified faculty * 5 Tutors	* 8 M.Sc. Nursing qualified faculty * 12 Tutors	* 12 M.Sc. Nursing qualified faculty * 18 Tutors	* 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)** 10/8/25 **Signature of Member (2)** 10/8/25

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.	Mrs. Bhavya y	PRINCIPAL	MSc (MSN)	2012	12110		15 YEARS	10-04-2025	YES	
2.	Mrs. ROOPA N	VICE PRINCIPAL	MSc (MSN)	2016	139092		9YEARS	13-03-2024	YES	
3.	Mrs REEJA JOSEPH	ASSOC PROFESSOR	MSC, (N)	2012	16080	-	15years	01-10-2016	YES	
4.	Mrs. HELEN TOM	ASSOC. PROFESSOR	MSC(OBG)	2018	27453		7YEARS	02-11-2028	YES	
5.	Mr. SALOMAN	ASST PROFESSOR	MSc (MSN	2024	5691		1YEARS	07-05-2025	YES	
6.	Mrs. SHINU MOHAN RAJ	ASSOC PROFESSOR	MSc (Peadiatric)	2014	37778		11YEARS	03-01-2019	YES	
7.	Ms. ROHINI MARIA GEORGE	ASSOC PROFESSOR	MSc (CHN)	2016	34882	8 YEARS	-	17-04-2017	YES	
8.	Ms. AIBY V I	NSG TUTOR	BSc (N)	2023	128114	2 YEARS		28-06-2023	YES	
9.	Ms. ANIJA JACOB	NSG TUTOR	BSc. (N)	2010	23435	3 YEARS	-	16-05-2022	YES	
10.	Mrs. SUSHMITHA	ASST LECTURER	BSc (N)	2015	75435	9 YEARS		23-10-2024	YES	
11.	Mrs. ANES	ASST LECTURER	BSc (N)	2003	738	15YEARS		24-08-2017	YES	
12.	Ms. NEHA BABY	NSG TUTOR	BSc (N)	2023	157713	1YEAR	-	12-07-2024	YES	
13.	Ms. MUNNI MOL	NSG TUTOR	BSc (N)	2023	148654	1 YEAR	-	15-01-2024	YES	
14.	Ms. MEENU J H	NSG TUTOR	BSc (N)	2025	KL03202501801	5 MONTHS	-	13-03-2025	YES	
15.	Ms. ARYA SANTHOSH	NSG TUTOR	BSc (N)	2025	177593	6 MONTHS	-	05-03-2025	YES	
16.	Ms. KRIPA	NSG TUTOR	BSc (N)	2025	172859	4 MONTHS	-	08-04-2025	YES	
17.	Ms. JASMINE	NSG TUTOR	BSc (N)	2025	KL03202502509	4 MONTHS	-	03-04-2025	YES	
18.	Ms. SURABHI	NSG TUTOR	BSc (N)	2025	KSNC0000581319	2 MONTHS	-	05-06-2025	YES	
19.	Mr. JOYAL ANTONY	NSG TUTOR	BSc (N)	2025	172735	4 MONTHS	-	17-04-2015	YES	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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Rajarajeshwari Nagar Bengaluru - 98

20.	Ms. LIMAMOL	ASST PROFESSOR	MSc (N)	2016	21029	2 YRS	-	23-03-2023	YES	Clinical Posti
21.	Mr. SUBHADEEP MISHRA	NSG TUTOR	BSc (N)	2022	139874	3 YEARS	-	04-06-2023	YES	On Leave
22.	Ms. ANGEL BENNY	NSG TUTOR	BSc (N)	2023	151552	1 YEAR		09-10-2024	YES	
23.	Ms. SONA B	NSG TUTOR	BSc.(N)	2025	KSNC0000582503	6 MONTHS		18-03-2025	YES	
24.	Ms. KRISHNA	NSG TUTOR	BSc.(N)	2025	172431	4 MONTHS		25-04-2025	YES	
25.	Ms. AGNA	NSG TUTOR	BSc.(N)	2025	171539	5 MONTHS		05-03-2025	YES	
26.	Ms. MEKHA JACOB	NSG TUTOR	BSc.(N)	2025	173155	3MONTHS		08-05-2025	YES	
27.										
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Signature of Chairman **Signature of Member (1)** 10/8/25 **Signature of Member (2)** 10/8/25

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Rajarajeshwari Nagar Bengaluru 98

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
1	Dr. Kumar	MBBS	Physiology/Pharmacology	13	
2	Ms. Spoorthi Sadar	MSc Microbiology	Microbiology	3	
3	Mrs. Kripa Raghunathan	M. Phil	Microbiology	8	Nil
4	Mrs. Smitha	M. Phil	Statistics	9	
5	Mr. Nandulal	Msc Sociology	Sociolgy	4	
6	Mrs. Nisha	Asst Lecturer	MSc in Biochemistry	9	

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)	23,200sq.ft (40 – 60 intake)	**24500sq.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	**4000sq.ft**	Verified the physical infrastructure Provided by the college and found to be appropriate as per the norms.
	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	**400sq.ft**	
	2. Vice-Principal Chamber	200	**300sq.ft**	
	3. HOD	5 x 200 = 1000	**1200 sq.ft**	
	4. Professor/Assoc. Prof	800+2400=3200	**3500 sq.ft**	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)	**600**	**670 sq.ft**	
	7. Accountants Office	**100**	**200 sq.ft**	
	8. Store Room	**100**	**400 sq.ft**	
	9. Record room	**100**	**200 sq.ft**	
	10. Room for	**100**	**400 sq.ft**	

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10/8/25

	maintenance staff			
	11. Xeroxing room	**100**	**200 sq.ft**	
	12. common room (Girls & Boys)	600+400= 1000	**1500 sq.ft**	Verified
	13. Multipurpose hall / Seminar hall/ examination hall	3000	**3200 sq.ft**	
	14. Toilets	1000	**1000 sq.ft**	
	15. A.V/Aids room	600	**800 sq.ft**	

S. No	Details	Required	Existing	Verified by LIC team
4	**LABORATORIES**	**(40-60 intake)**		College has provided the laboratory facilities as per the courses.
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	**1700 sq.ft**	
	Nutrition & Community Health Nursing	1200sq.ft	**1300 sq.ft**	
	Obstetrics and Gynecology Laboratory	900sq.ft	**1100 sq.ft**	
	Pediatrics Nursing Laboratory	900sq.ft	**1100 sq.ft**	
	Pre-Clinical Sciences Laboratory	900sq.ft	**1000 sq.ft**	
	Computer Lab (1: 5 computer :student)	1500sq.ft	**1600 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)

<u>Building Documents:</u> **Annexure – 12**

SL NO	Particulars	Verified by the LIC team
1	**Registered documents in sub registrar office**	Notarised Leased Documents.
2	**Is the college building own or leased ?**	Leased for 30 yrs.
3	**Blue print of the building plan approved and attested by competent authority.**	Available.
4	**Building construction license from competent authority**	Yes.
5	**Tax paid receipt (Latest / current year)**	Paid. & Verified.
6	**Occupancy certificate.**	Available
7	**Sale deed / Lease deed of the building / Land.**	—

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

10/8/25 10/8/25

8	Land Conversion order from DC	Available.
9	Town planning/Authorities approval order	—

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, 2021F.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
1	KA41M6651	42	Yes	Yes	Yes

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	2500 sq.ft	yes	Yes	Yes	

Total No. of Nursing Books available	1500	**No. of Nursing Journals subscribed**	3
No. of Thesis/Research titles available	5	**Is internet facility available for Students?**	YES
No of e-books	2	**How many books were purchased in last financial year?**	150

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	MOHAN KUMAR	M LIB	6 YEARS	
				Nil

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 willincrease/decrease according to the number of seats approved.

17. Academic activities : Enclose the details of past 3 years **Annexure - 15**

Signature of Chairman **Signature of Member (1)** 10/8/25 **Signature of Member (2)** 10/8/25

Academic activities	Particulars	Remarks
Research Projects	NA	
Conferences conducted	NA	Nil
Conferences attended	NA	

* 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 MOU(Registered parent hospital MOU)	165	300MTS	95%	College has affiliation with Rastrotthana Hospital, R.R. Nagar which has 165 beds strength
NAME OF THE TRUST/ Person owning The Hospital				
Name Of The Owner Of The Trust of Hospital				
Affiliated 1 RASHTROTTHANA HOSPITAL	165	300MTS	93%	

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	2 MANASA HOSPITAL	100	350KM	98%	Nil
	3 NU HOSPITAL (MOU/Clinical permission letter)	104	15KM	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, 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**forBangalore 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, 2021F.NO. 11-1/2019-INC.)
- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/agencies/institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)

Note

- Verify the original KPMEA documents, pollution control certificate of the hospitals to prove the ownership of the hospital and the number of beds
- Verify the MOU(undertaking) between trust member (owner of the hospital) and the trust [i.e., signed by all trustees/members/directors of Trust/Society/ Company].owning the nursing institution with the clause to the effect that the trustee/member/director of the Trust/Society/ Company would not allow the hospital to be treated Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years.

Verify &Attach Clinical permission letter, fee paid receipts.

Remarks: The institution has established is the year 2003 and they have affiliated to 165 beds strength multispeciality hospital.

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			60	97%
Surgery including OT			40	95%
Obstetrics & Gynecology			40	93%
Pediatrics,	NA		10	92%
Emergency Medicine			40	96%
Psychiatry			10	91%

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT			06	93%
Minor OT			06	92%
Dental, Otorhinolaryngology, Ophthalmology			07	92%
Burns and Plastic			06	90%
Neonatology care unit	NA		05	90%
Communicable disease/Respiratory medicine/TB & chest diseases			05	98%
Dermatology			10	92%
Cardiology			05	90%

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Oncology			07	94%
Neurology/Neuro-surgery			05	93%
Nephrology/Urology			06	90%
ICU/ICCU	NA		08	92%
Geriatric Medicine			18	93%
Any other			10	93%

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	**KENGERI PRIMARY HEALTH CENTRE**
Adopted / Affiliated	**AFFILIATED**
Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
Distance from the Nursing Institute	**5**
b. Services Rendered by Health & Family Welfare Programmes	**ANTENATAL VACCINATION FAMILY PLANNING**
URBAN FEILD :	
a. Name of CHC / PHC / SC	**KENGERI PRIMARY HEALTH CENTRE**
Adopted / Affiliated	
Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
Distance from the Nursing Institute	**5**
b. Services Rendered by Health & Family Welfare Programmes	**ANTENATAL VACCINATION 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**	-
b.	Post Basic B.Sc. Nursing	**NO**	-
c.	M.Sc. Nursing	**NO**	-
21	**Time Table available for all Nursing Programmes**		
a.	Basic B.Sc. Nursing	**YES**	-
b.	Post Basic B.Sc. Nursing	**NO**	-
c.	M.Sc. Nursing	**NO**	-

Signature of Chairman **Signature of Member (1)** 10/8/25 **Signature of Member (2)** 10/8/25

22	**Records of Students :** Are the following students records are maintained well?		
a.	Admission record	YES	-
b.	Daily Attendance Registers	YES	-
c.	Health Records	YES	-
d.	Clinical and field experience record	YES	-
e.	Practical record books - procedure record	YES	-
f.	Practical record books - Midwifery case book	YES	-
g.	Leave record	YES	-

h.	Extracurricular activities of students	YES	-
i.	Cumulative record of each	YES	-
j.	Course planning of each subject	YES	-
k.	Rotation plans	YES	-
l.	Committee Meetings	YES	-
m.	Affiliation records	YES	-
n.	Records of Stock	YES	-
o.	Annual report of activities and achievements	YES	-
p.	Staff development programmes	YES	-
q.	Anti ragging committee	YES	-
r.	Student welfare committee	YES	-
s.	POSHE Committee	YES	-
t.	Prevention of Gender harassment committee	YES	-

23	**Hostel Facilities :Annexure – 12**		
a.	Whether the college is having a separate Hostel?	YES	-
b.	Built-up area of the Hostel	**28000Sq.ft**	
c.	Is the Hostel Owned or Rented/Leased?	-	**Rented/Leased**
d.	Is there separate provision of Hostel for Male and Female Students?	YES	-
e.	Total No. of students in the hostel	**Girls : 65**	**Boys : 34**
f.	Total No. of rooms	**Girls : 32**	**Boys : 25**

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

10/8/25

g.	Water Supply	YES	-
h.	Electricity Supply	YES	-
i.	Is Facilities available for outdoor games and indoor games?	YES	-
j.	Is Sick room available?	YES	-
k.	Whether the hostel mess is available with	YES	-
l.	Safe drinking water facilities	YES	-

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	✓		

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

	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, 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: 1. The institution has provided necessary physical infra-structure to run the B.Sc (N) course as per the norms.

2. The college provided required laboratory facilities in all the departments to train B.Sc (N) students.

3. Provided library facilities with required number of text books & journals as per the norms.

4. College has affiliation with 165 Beds strength multi speciality hospital to provide clinical training to B.Sc (N) students.

5. The institution has appointed well qualified and experienced teaching faculty members to train B.Sc (N) students as per the requirement of apex bodies.

6. The institution has separate hostel facilities for both boys & girls.

Overall the college has necessary physical infrastructure, labora-tories, library, clinical facilities and qualified staffs to train B.Sc (N) course students as per the norms.

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

10/08/25

10/8/25

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at THE BANGALORE SOCIAL AND EDUCATIONAL COLLEGE OF NURSING which has applied for continuation of affiliation for the academic year 2025-26.

We have conducted LIC inspection of this college on 10/08/2025 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 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)

सत्यमेव जयते

INDIA NON JUDICIAL

Government of Karnataka

Rs. 100

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Certificate No.	:	IN-KA13717050782449X
Certificate Issued Date	:	10-Aug-2025 12:29 PM
Account Reference	:	NONACC (FI)/ kagcsl08/ RAGHUVANAHALLI3/ KA-JY
Unique Doc. Reference	:	SUBIN-KAKAGCSL0842619354348549X
Purchased by	:	BSE COLLEGE OF NURSING
Description of Document	:	Article 4 Affidavit
Property Description	:	AFFIDAVIT
Consideration Price (Rs.)	:	0 (Zero)
First Party	:	BSE COLLEGE OF NURSING
Second Party	:	RGUHS
Stamp Duty Paid By	:	BSE COLLEGE OF NURSING
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

सत्यमेव जयते

G SEVA KENDRA RAGHUVANAHALLI Authorized Signatory

RS. 100

Please write or type below this line

UNDERTAKING by Trust Management

We the Chairman/President/Secretary/Member of the trust THE BANGALORE SOCIAL AND EDUCATIONAL ASSOCIATION are submitting the affidavit to University.

The society THE BANGALORE SOCIAL AND EDUCATIONAL ASSOCIATION is running/managing the colleges

1. THE BANGALORE SOCIAL AND EDUCATIONAL COLLEGE OF NURSING since 22 years.

Director
Bangalore Social and Educational
College of Nursing

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.

GOVERNMENT OF KARNATAKA

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

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

We also confirm that the college is solely managed by the trust and is not leased/sub leased to any other trust/agency to manage the college.

We also confirm that the college is abiding to the norms of Apex body/RGUHS. As prescribed from time to time.

If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.

Director
Bangalore Social and Educational
College of Nursing