	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 NANDEESH J	DR SUDHAKARA MUNISWAMAPPA	MR. MAHADEVA PRASAD N.S
Designation	PRINCIPAL	ASSO. PROFESSOR	PRINCIPAL
Address	AISHWARYA INSTITUTE OF NURSING SCIENCES MADDUR, MANDYA	KRISHNADEVARAYA COLLEGE OF DENTAL SCIENCES & HOSPITAL BENGALURU	CHARKOS COLLEGE OF NURSING MYSORE
Mobile No	9845471377	9845978858	9886674876
Email ID	nandeesh.aips@gmail.com	Sudhakarmop@gmail.com	

For the Academic Year : 2025 – 2026			*Date of Inspection:* 07:08:2025	
(Please Tick the Appropriate Boxes Below)				
Type of Inspection:	1.Fresh Affiliation		4. Re-Inspection	
	2.Continuation of Affiliation	✓	5.Surprise Inspection	
	3.Enhancement of Seats		6. Change of Name/Address	
	7. Additional Course (M.Sc Nursing) only.			

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

1	Name of the Institution with Full Address	ROYAL COLLEGE OF NURSING SY NO 1/2 MALLAPURA VILLAGE, KASABA HOBLI, NELAMANGALA TALUK BANGALORE - 562162	2	Year of Establishment 12:12:2003
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 address	THE HOLY FAMILY EDUCATION SOCIETY [R] No: 232/235 JAYANAGAR, BANGALORE - 560 011. (Enclose copy of Registration documents of Society/Trust) **Annexure – 1** **Email:** royalcollegeofnursing96@gmail.com	**Website:** royalcollegeofnursing.co.in	

Signature of Chairman 7/8/25.
(Dr. Nandeesh. J)

Signature of Member (1)
Dr Sudhakara.

Signature of Member (2) 07/08/25

	(b). Name of the Owner of Trust/Society	MRS. ROSAMMA JOSEPH	
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council : (Enclose copy ofGoverning Council Members & Audit report of Society/Trust)	Annexure - 2
5	Details of Principal/Head of the institution	Name: DR ROSAMMA VJ Qualification: MSC(N) PHD Experience: Email: royalcollegeofnursing96@gmail.com	Mobile No: 9886044735 Office No: 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 addressVerify 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				
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UGor b) for UG and PG courses c) NPCC	Amount
B.Sc. Nursing	CONTINUATION AFFILIATION	45,000	90,000	60,000	b) FOR UG&PG COURSES	1,95,000
Post Basic B.Sc. Nursing	CONTINUATION AFFILIATION	45,000	90,000	60,000	57,500	2,52,500
					Total (A)	4,47,500
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation			No of Seats X Prescribed fees of each faculty		
	1. MEDICAL SURGICAL NURSING			05 X 2000		10,000/-
	2. OBG NURSING			05 X 2000		10,000/-
	3. COMMUNITY HEALTH NURSING			05 X 2000		10,000/-
	4. PAEDIATRIC NURSING			05 X 2000		10,000/-
	5. PSYCHIATRIC NURSING			05 X 2000		10,000/-
	APPLICATION FEES:- BSc, PBBSc MSc(N) COURSE IDENTIFICATION FEES UG/PG			03 X 1000 - 3000 03 X 50 - 150	Total (B)	50,000+3000+150 53150/-
NPCC						
					Total (C)	
					Grand Total (A+B+C)	500650/-

Online Transaction Number or Details: BANK: STATE BANK OF INDIA
TRANSACTION REFERENCE NO: ZSBI2WX082VPNQ
DATE: 22:12:2024

Signature of Chairman

Signature of Member (1)
Dr. Sadhakara

Signature of Member (2)

Remarks:. Verified with Original Fee Paid Receipt.

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	AKUKA 383 MPS 2003 DATE: 12/12/23 Annexure - 5	RGU/AFF/NSG/COA/01/2024-2025 29/09/25 Annexure - 6	KSNC/1157/2024-25 25/04/2024 Annexure - 7	Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60		
	Admissions Made for the Current Academic Year	60	60	60		
Post Basic B.Sc. Nursing	Approval Letter No. and Date	AKUKA 107 MPS 2010 DATE: 08/04/2010 Annexure - 5	RGU/AFF/NG/COA/01/2024-2025 29/09/25 Annexure - 6	KSNC/1157/2024-25 25/04/2024 Annexure - 7	Annexure - 8	
	Sanctioned Intake	60	60	60		
	Admissions Made for the Current Academic Year	60	60	60		
M.Sc. Nursing in a. Community Health ☑ b. Medical Surgical ☑ c. OBG ☑ d. Paediatric ☑ e. Psychiatry ☑	Approval Letter No. and Date	AKUKA 39 MPS 2008 DATE: 27/06/2008 Annexure - 5	RGU/AFF/NSG/COA/01/2024-2025 29/09/25 Annexure - 6	KSNC/1157/2024-25 25/04/2024 Annexure - 7	Annexure - 8	
	Sanctioned Intake	25	25	25		
	Admissions Made for the Current Academic Year	24	24	24		
M.Sc. NPCC	Approval Letter No. and Date	– Annexure - 5	– Annexure - 6	– Annexure - 7	– Annexure - 8	
	Sanctioned Intake	–	–	–	–	

Signature of Chairman

Signature of Member (1)
Dr. Sadhalaxmi

Signature of Member (2)

	Admissions Made for the Current Academic Year	–	–	–	–	–

9. Total No. of Students under Training in each of the Nursing Education Programme:

Programme		I year	II Year	III Year	IV Year	Total
B.ScNursing	Male	34	34	30	16	114
	Female	26	26	28	44	124
Post Basic B.Sc Nursing	Male	10	13	–	–	23
	Female	50	47	–	–	97
M.Sc Nursing	Male	04	03	–	–	07
	Female	20	22	–	–	42
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-------
			COPY ENCLOSED			

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

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

Annexure –10

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

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: Nil

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				01									
2	Vice-Principal	1	1				01									
3	Professor	1	1-2		1*		01			01						
4	Associate Professor	2	2-4		1*		02			01						
5	Assistant Professor	3	3-8	2	3*		03		02	03						
6	Tutor	8-16	16-24	2-10	--		19		08	–						
	Total	**16-24**	**24-40**	**4-12**			27		10	05						

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

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

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

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

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

Teaching Faculty details:–Details should be written in formatonly

Sl.No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teachingexperience		Dateof joining	Form-16 Submitt (Yes/No)	Signature of Faculty
						After UG	After PG			
1.	Dr. ROSAMMA V J	PRINCIPAL/DIRECTOR	MSC(N), PhD(N), MSN	BSC 1993 MSC 2005		9 YRS 7 Months	19 YRS 11 Months	01.12.2003		
2.	Dr. SWAMY R T	VICE PRINCIPAL	MSC(N), PhD(N), Paediatric	BSC 2008 MSC 2012	16518	1 YR 9 Months	14.5 YRS	02.02.2018		
3.	Mr. NUTHAN RAJ	PROFESSOR	MSC(N) Psychiatry	BSC 2008 MSC 2012	15418	1 YR 3 Months	8 YRS 2 Months	06.03.2019		
4.	Mrs. LATHA K	PROFESSOR	MSC(N) OBG	BSC 2010 MSC 2014	33466		11.2 YRS	23.05.2025		
5.	Mr. NITHYARAJ K	ASSOCIATE PROFESSOR	MSC(N) MSN	BSC 2011 MSC 2015	45422	I YR 4 Months	11 YRS 1 Month	01.06.2015		
6.	Mr. SHYAMA SUNDER N	ASSOCIATE PROFESSOR	MSC(N) CHN	MSC 2014	41378	1 YR 2 Months	11 YRS 8 Months	14.07.2023		
7.	Ms. ASHWINI G N	ASSOCIATE PROFESSOR	MSC(N) Paediatrics	BSC 2010 MSC 2014	34032		12.3 YRS	04.03.2015		
8.	Ms. ASWATHY A	ASSISTANT PROFESSOR	MSC(N) OBG	BSC 2016 MSC 2020	76932		9.8YRS	13.09.2016		
9.	Ms. MAMTHAZ S	ASSISTANT PROFESSOR	MSC(N) MSN	PB BSC 2014 MSC 2021	137334		6.9 YRS	04.01.2022		
10.	Ms. MOUNESHWARA	ASSISTANT PROFESSOR	MSC(N) CHN	BSC 2009 MSC 2020	19431		3 YRS 2 Months	19.04.2022		
11.	Mr. HASHIM MAJNOON MIR	LECTURER	MSC(N) Psychaitry	BSC 2019 MSC 2023	128262	1 YR	1 YR	10.06.2024		
12.	Ms. JEENA JOSEPH	LECTURER	MSC(N) MSN	PB BSC 2014 MSC 2024	10108	1 YR	1 YR	07.08.2024		
13.	Mr. ANILKUMAR	TUTOR	BSC(N)	BSC 2021	108422	4 YRS		03.12.2021		
14.	Ms. APARNA DEVAN	TUTOR	BSC(N)	BSC 2022	136513	1 YR		18.07.2024		
15.	Mr. ARUN U S	TUTOR	BSC(N)	BSC 2022	136136	1.6 YRS		06.03.2024		
16.	Mr. SIMEON PHILIPS	TUTOR	BSC(N)	BSC 2022	140099	2 YRS		30.12.2023		
17.	Ms. UNNIMAYA	TUTOR	BSC(N)	BSC 2022	137668	1.3 YRS		11.05.2023		
18.	Mr. BASAWARAJA PATIL	TUTOR	PB BSC(N)	PB BSC 2014	132169	9 YRS		04.10.2025		
19.	Mr. BIRUDU VEERAIAH	TUTOR	BSC(N)	BSC(N) 2016	78728	3 YRS		30.05.2022		

SignatureofChairman

SignatureofMember(1)

SignatureofMember(2)

Principal
Royal College of Nursing
Bangalore

20.	Mr. VASU K	TUTOR	BSC(N)	BSC 2018	18688	3 YRS		06.07.2022		
21.	Mr. ERANJI G K	TUTOR	BSC(N)	BSC 2016	77266	8 YRS		15.06.2017		
22.	Mr. KASIM SAB	TUTOR	BSC(N)	BSC 2020	116160	4 YRS		23.02.2021		
23.	Mr. GURUPRASAD	TUTOR	BSC(N)	BSC 2009	024056	3 YRS		20.11.2021		
24.	Ms. JISHA V R	TUTOR	BSC(N)	BSC 2020	115107	1.1 YRS		04.07.2024		
25.	Ms. LISA VARGHESE	TUTOR	BSC(N)	BSC 2015	76118	3 YRS		05.06.2022		
26.	Ms. MAMATHA M	TUTOR	BSC(N)	BSC 2012	54265	12 YRS		11.12.2015		
27.	Ms. MEGHA VINOY	TUTOR	BSC(N)	BSC 2020	115441	3 YRS		27.04.2022		
28.	Ms. SOUMYA G	TUTOR	PB BSC(N)	PB BSC 2020	070846	9 YRS		07.03.2016		
29.	Ms. MONISHA P G	TUTOR	BSC(N)	BSC 2016	77883	2 YRS		01.06.2022		
30.	Ms. VIDHYA C	TUTOR	PB BSC(N)	PB BSC 2011	39879	13 YRS		29.05.2012		
31.	Mr. PRADEEP	TUTOR	PB BSC(N)	PB BSC 2017	169340	7 YRS		08.10.2018		
32.	MR. SANTHOSH KUMAR	TUTOR	BSC(N)	BSC 2011	41748	12 YRS		24.11.2012		
33.	Ms. SAVITHA	TUTOR	BSC(N)	BSC 2017	80365	7 YRS		17.11.2017		
34.	Mr. SHARATHA R KHANDOJI	TUTOR	PB BSC 2015	132110	132110	3.4 YRS		06.04.2022		
35.	Ms. SAYISTA KHANUM	TUTOR	BSC(N)	BSC 2020	101890	4 YRS		13.10.2020		
36.	Ms. SHYLA D N	TUTOR	PB BSC(N)	PB BSC 2014	161320	3 YRS		10.06.2022		
37.	Ms. SUNI GEORGE	TUTOR	PB BSC(N)	PB BSC 2021	25158	1 YR		07.04.2024		
38.	Ms. VINUTHA T T	TUTOR	BSC(N)	BSC 2020	129073	3 YRS		17.12.2021		
39.	Ms. K M INDRANI	TUTOR	PB BSC(N)	PB BSC 2014	185065	3.1 YRS		07.07.2022		
40.	Ms. RAMYASHREE S	TUTOR	BSC(N)	BSC 2014	68123	7 YRS		20.04.2016		
41.	Mr. VENKATESH PRATHIPATI	TUTOR	BSC(N)	BSC 2021	23010	4 YRS		30.07.2025		
42.	Mr. KARTHIKA M	TUTOR	BSC(N)	BSC 2021	141894	3 YRS		01.08.2025		
43.										
44.										

SignatureofChairman

SignatureofMember(1)

SignatureofMember(2)

Principal
Royal College of Nursing
Bangalore

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 :

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	64280	
	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	3,600 Sq ft	Verified the physical infrastructure Provided by the College and found to be appropriate as per the norms of apex bodies.
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	1,800 Sq ft	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	4,500 Sq ft	
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each		
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	500	
	2. Vice-Principal Chamber	200	300	
	3. HOD	5 x 200 = 1000	800 EACH	
	4. Professor/Assoc. Prof	800+2400=3200	1500	
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		1000 Sq ft	
	7. Accountants Office		500 Sq ft	
	8. Store Room		500 Sq ft	
	9. Record room		500 Sq ft	
	10. Room for maintenance staff		300 Sq ft	
	11. Xeroxing room		300 Sq ft	
	12. common room	1000	2000 Sq ft	
	13. Seminar hall	3000	3000 Sq ft	
	14. Toilets	1000	1000 Sq ft	
	15. A.V/Aids room	600	900 Sq ft	

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

S. No	Details	Required	Existing	Remarks
4	**LABORATORIES**			Visited all the Laboratories and they have well equipped as per the rooms.
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1600 Sqft	
	Nutrition & Community Health Nursing	1200sq.ft	1200 Sqft	
	Obstetrics and Gynecology Laboratory	900sq.ft	900 Sqft	
	Pediatrics Nursing Laboratory	900sq.ft	900 Sqft	
	Pre-Clinical Sciences Laboratory	900sq.ft	900 Sqft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500 Sqft	

Note:

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

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

Building Documents: **Annexure – 12**

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

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	KA04AE3335	56	✓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	3500SqFt	YES ☑ No ☐	ADEQUATE	ADEQUATE	

Total No. of Nursing Books available	4500	No. of Nursing Journals subscribed	25
No. of Thesis/Research titles available	75	Is internet facility available for Students?	YES
No of e-books	30	How many books were purchased in last financial year?	

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01	Ms SAVITHA	MLib	06 YEARS	
				Nil

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 COPY ENCLOSED **Annexure - 15**

Academic activities	Particulars	Remarks
Research Projects		
Conferences conducted		Nil
Conferences attended		

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

18 Details of Clinical / Hospital Facilities : Annexure - 16

1	Do you have parent Medical College?	YES ☐	NO ☑
2	Do you have parent hospital?	YES ☐	NO ☑
	If Yes, Hospital Owned by	i. Trust/Society/Missionary ☐	
		ii. Trust member with MOU ☐	

Parent Hospital.		Total No. Beds	Distance from the college	Occupancy on the day of inspection (min 75%)	Remarks
Full Name & Address of the Parent Hospital					The institution was established in the year 2003 and they have affiliated to Govt Hospitals.
NAME OF THE TRUST/ Person owning The Hospital					
Name Of The Owner Of The Trust of Hospital					
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 KC GENERAL HOSPITAL BANGALORE	503	25 KM	95%	
	2 GOVT HOSPITAL NELAMANGALA	100	04 KM	85%	
	MANASA HOSPITAL	100	250 KM	85%	

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

NOTE:

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

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

be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021F.NO. 11-1/2019-INC.)

- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/ agencies / institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)

Note

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

Verify &Attach Clinical permission letter, fee paid receipts.

Remarks:

The institution was established in the year 2003 and they have affiliated to Govt Hospitals.

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			140	82%
Surgery including OT			140	78%
Obstetrics & Gynecology			120	90%
Pediatrics,			62	85%
Emergency Medicine			41	90%
Psychiatry			100	85%

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT			15	80%
Minor OT			10	85%
Dental, Otorhinolaryngology, Ophthalmology			15	90%
Burns and Plastic			10	80%
Neonatology care unit			35	90%
Communicable disease/ Respiratory medicine/TB & chest diseases			35	93%
Dermatology			20	90%
Cardiology			30	93%
Oncology			10	90%
Neurology/Neuro-surgery			20	90%
Nephrology/Urology			10	94%
ICU/ICCU			50	95%
Geriatric Medicine			60	95%
Any other ORTHOPEDICS			120	94%

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

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

19	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	TYMAGONDLU & ASURUHALLI
Adopted / Affiliated	AFFILIATED
Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	15KM
b. Services Rendered by Health & Family Welfare Programmes	MCH, NATIONAL HEALTH PROGRAMMES, GENERAL, MEDICINE, SURGERY
URBAN FEILD :	
a. Name of CHC / PHC / SC	NELAMANGALA, TALUK HOSPITAL
Adopted / Affiliated	AFFILIATED
Administrate red by	State Govt. ☑ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	03KM
b. Services Rendered by Health & Family Welfare Programmes	GENERAL, MEDICINE, SURGERY, MCH NATIONAL HEALTH 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 ☐

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

h.	Extracurricular activities of students	YES ☑	NO ☐
i.	Cumulative record of each	YES ☑	NO ☐
j.	Course planning of each subject	YES ☑	NO ☐
k.	Rotation plans	YES ☑	NO ☐
l.	Committee Meetings	YES ☑	NO ☐
m.	Affiliation records	YES ☑	NO ☐
n.	Records of Stock	YES ☑	NO ☐
o.	Annual report of activities and achievements	YES ☑	NO ☐
p.	Staff development programmes	YES ☑	NO ☐
q.	Anti ragging committee	YES ☑	NO ☐
r.	Student welfare committee	YES ☑	NO ☐

23	**Hostel Facilities :Annexure - 12**		
a.	Whether the college is having a separate Hostel?	YES ☑	NO ☐
b.	Built-up area of the Hostel	Sq.ft	
c.	Is the Hostel Owned or Rented/Leased?	Own ☑	Rented/Leased ☐
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☑	NO ☐
e.	Total No. of students in the hostel	Girls : 250	Boys : 140
f.	Total No. of rooms	Girls : 90	Boys : 30
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: The LIC Team had visited the college on 07/08/2025 towards grant & Continuation & affiliation for the yr 2025-2 and made the following observations.

1) College has provided required physical infrastructure for all the nursing courses as per the norms.
2) The institution has provided well equipped Laboratories in all the specialities with necessary instruments, articles and manikins.
3) College has well furnished library with good ventilation and contains required number & text books, titles and journals for U.G & P.G. nursing courses.
4) College has appointed qualified U.G and P.G. teachers as per the norms and they were present on the day & inspection.
5) Institution has provided separate Hostels for both boys & Girls.
6) College has provided required clinical training facilities for both U.G and P.G. Nursing students in their affiliated hospitals.

Overall the institution has spacious class rooms, Seminar hall, well furnished library, well equipped laboratories and appointed Qualified guides and P.G teachers to train B.Sc(N), P.B.B.Sc(N) and M.Sc(N) students. The clinical training is provided in Govt. hospitals and also in speciality hospitals as per the norms.

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Signature of Chairman

Signature of Member (1)
(Dr. Sudhakara. M)

Signature of Member (2)

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at **Royal College of Nursing** *which has applied for continuation of affiliation for the academic year2024-25.*

We have conducted LIC inspection of this college on **07/08/2025** *and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Student's 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	***AC Member***	***Subject Expert***
(Chairman)	***(Member)***	***(Member)***
	Dr. Sudhakara .M.	

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

The Holy Family Education Society (R.)
ROYAL COLLEGE OF NURSING
Survey No: 1/2, Mallapura, Nelamangala, Bangalore-562162
Ph: 9886044735 Email: royalcollegeofnursing96@gmail.com

(Approved by Govt. of Karnataka, recognized by Concerned Councils)

UNDERTAKING BY TRUST MANAGEMENT

We the Secretary of the society **DR ROSAMMA VJ** are submitting the affidavit to University.

The society **THE HOLY FAMILY EDUCATION SOCIETY, Bangalore** is running/managing the colleges **ROYAL COLLEGE OF NURSING**, Nelamangala, Bangalore since 22 **years.**

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

We confirm that the faculty in the college 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.

for The Holy Family Education Society (R)

Secretary

Secretary