



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. ARVIND KATTI	Prof. MANU.B.	Mrs. Wilmeera Barnadet D Mello
Designation	Asso. Professor	Principal	Asso. Professor
Address	Surgery Department, HKE's Dr. Malakaraddy Homeopathic Medical College & Hospital, Kalaburgi	<i>SURYA</i> G J College of Nursing, Malnad Building, 3 rd Cross, Garden Area, Shivamogga – 577 201	Charkos College of Nursing, Mysore
Mobile No	9481640062	8861347845	9972319361
Email ID	arvindkatti@gmail.com	bmanusonu86@gmail.com	

For the Academic Year : 2025-26.

Date of Inspection: 19.08.2025

(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	S.S.INSTITUTE OF NURSING SCIENCES, “Jnanashankara”, NH-4 Bypass Road, Davangere – 577 005.	2	Year of Establishment
			2004	
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary /Trust/Society /Company		
3	(a). Name of the Trust/Society & complete postal address & Phone number	Bapuji Educational Association (Regd.) PJ Extn., Davangere-577 002. (Enclose copy of Registration documents of Society/Trust) Annexure – 1		
		Email: bea_dvg@hotmail.com	Website: beadv.org	
	(b). Name of the president/Secretary/ Chairman of Trust/Society & Phone No	Sri. Shamanur Shivashankarappa, Secretary, Bapuji Educational Association ®. Davangere. Phone No. 08192-251868		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 09 (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2		
5	a) Details of Principal/Head of the institution (After MSc)	Name: Mr. VEERESHA.V.B. Qualification: M.Sc., NURSING Experience: 16 Years. Email: veereshvbv@gmail.com	Mobile No: 9972474258 Office No: 08192-266325 Fax No: 08192-266808 Residential phone No: 9739823800	
	b) Drawing authority of the college	Principal, S.S. Institute of Nursing Sciences, Davangere.		
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. BAPUJI COLLEGE OF NURSING SS General Hospital, K.R.Road, Davangere – 577001. (Verify& enclose a copy of the registered trust Documents) Annexure – 3

7. Affiliation Fee Paid Details:

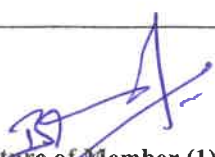
Annexure - 4

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for					Amount
		Annual Fees	Renewal Fees	Administrative Charges	Course Identification Fee.	Helinet Inst Fee a) only for UG or b) for UG and PG courses c) NPCC	
B.Sc. Nursing	1,000	75,000	1,50,000	1,00,000	50	32,500	3,58,550
Post Basic B.Sc. Nursing	NA	NA	NA	NA	NA	NA	NA
Total (A)							3,58,550
PG Course:- (M.Sc. Nursing)	P G Continuation / Fresh Affiliation Application Fee.			No of Seats X Prescribed fees of each faculty	Course Identification Fee. Rs.50/-		1,050
	1. Medical Surgical Nursing.			04	-		8,000
	2. Community Health Nursing.			04	-		8,000
	3.						-
	4.						-
	5.						-
					Total (B)		17,050
NPCC							
	-				Total (C)		-
Grand Total (A+B+C)							3,75,600

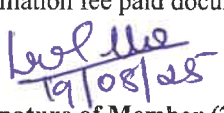
Online Transaction Number or Details:

Remarks:


Signature of Chairman


Signature of Member (1)

Verify & Enclose copy of Affiliation fee paid documents

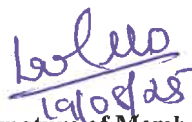

Signature of Member (2)

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	HFW488.MPS2010, Bangalore. Dt. 20.08.2013 Annexure - 5	RGU/AFF/NSG/ CoA/01/2024-25, Dt. 20.09.2024 Annexure - 6	KSNC/1157/ 2024-25. Dt. 31.12.2024 Annexure -7	File No. 18-15/1236, Dt. 23.08.2024 Annexure- 8	
	Affiliation Sanctioned Intake	100				
	Admissions Made for the Current Academic Year	100				
Post Basic B.Sc. Nursing	Approval Letter No. and Date	-	-	-	-	Not applicable
	Sanctioned Intake	-	-	-	-	
	Admissions Made for the Current Academic Year	-	-	-	-	
M.Sc. Nursing in a. Community Health ☒ b. Medical Surgical ☒ c. OBG ☐ d. Paediatric ☐ e. Psychiatry ☐	Approval Letter No. and Date	HFW488.MPS2010, Bangalore. Dt. 20.08.2013 Annexure - 5	RGU/AFF/NSG/ CoA/01/2024-25, Dt. 20.09.2024 Annexure - 6	KSNC/1157/ 2024-25. Dt. 31.12.2024 Annexure -7	File No. 18-15/1236, Dt. 23.08.2024 Annexure- 8	
	Sanctioned Intake					
	Admissions Made for the Current Academic Year					
M.Sc. NPCC	Approval Letter No. and Date	-	-	-	-	Not applicable
	Sanctioned Intake	-	-	-	-	
	Admissions Made for the Current Academic Year	-	-	-	-	


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

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

Programme		I year	II Year	III Year	IV Year	Total
B.ScNursing	Male	22	16	14	13	63
	Female	78	84	86	87	337
Post Basic B.Sc Nursing	Male	-	-	-	-	-
	Female	-	-	-	-	-
M.Sc Nursing	Male	1	1	-	-	-
	Female	-	1	-	-	-
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)

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-----
	Not applicable.					

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 -9

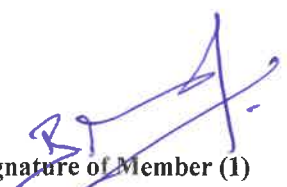
Sl. No	Name of the Student	Nursing Council Registration Number	Residence Address	Place & Address of work at the time of admission (verify with experience certificate and relieving order)	Board / University from where last exam was qualified	Duration of Course with dates From----- To-----
	List Enclosed					

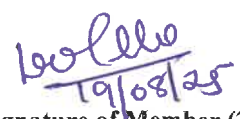
Note: Separate list to be enclosed and Biometric attendance to be verified and copy to be attached.

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

Remarks: _____


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	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*		-	5	-	1*	-	-		-
4	Associate Professor	2	2-4					1*		-	6	-	1*	-	-		-
5	Assistant Professor	3	3-8				2	3*		-	6	-	2*	-	-		-
6	Tutor	8-16	16-24				2-10	--		-	24	-	-	-	-		-
	Total	16-24	24-40				4-12			-	43	-	-	-	-		-

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

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

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

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

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

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

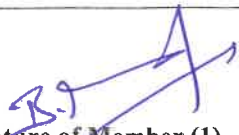
Year Wise Distribution of Faculty for B.Sc Nursing :

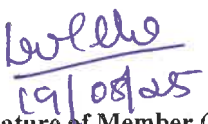
(Start the Program i.e, for 1st Year, minimum 3 M.Sc. Nursing qualified faculty shall be appointed.)

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

* Aadhar based biometric attendance for students


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

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

Sl. No	Name of the teaching Faculty	Designation	Qualification along with specialty	Year of passing	KSNC Reg. Number	Teaching experience After UG After PG	Date of joining	Form -16 Submitted (Yes/No)	Signature of Faculty
1.	Mr. VEERESHA.V.B.	Principal.	M.Sc., Nursing in Community Health.	July-2007	43535	3 years	18 years	Yes.	
2.	Mr. PRAVEENA KADUR	Asst. Prof.	M.Sc., Nursing in Community Health.	Jan-2010	2531	1 year	15 years	Yes.	
3.	Mr. DARSHAN BEVOOR.B.	Lecturer.	M.Sc., Nursing in Community Health.	July-2012	19430	1 year	13 years	No.	
4.	Mr. NAVEEN KUMAR.P.R.	Lecturer.	M.Sc., Nursing in Child Health.	July-2010	3699	2 years	15 years	Yes.	
5.	Mr. VENU.A.S.	Lecturer.	M.Sc., Nursing in Child Health.	July-2010	4398	1 year	15 years	Yes.	
6.	Mr. CHIRANTHANA.B.	Lecturer.	M.Sc., Nursing in Child Health.	Sept-2012	15861	1 year	13 years	Yes.	
7.	Mrs. MAMATHA.M.	Lecturer.	M.Sc., Nursing in Child Health.	Jan-2015	23334	1 year	10 years	No.	
8.	Mrs. AMBIKA.M.S.	Lecturer.	M.Sc., Nursing in Child Health.	May-2014	87625	2 years	11 years	No.	
9.	Mr. PRAVEEN KUMAR.S.V.	Lecturer.	M.Sc., Nursing in Medical Surgical.	July-2010	5984	1 year	15 years	Yes.	
10.	Mrs. ROOPA.N.	Lecturer.	M.Sc., Nursing in Medical Surgical.	Sept-2018	58604	3 years	7 years	No.	
11.	Mrs. LAKSHMIDEVI.S.	Lecturer.	M.Sc., Nursing in Medical Surgical.	Nov-2020	77296	2 years	5 years	No.	
12.	Mrs. SOUMYA.A.S.	Lecturer.	M.Sc., Nursing in Medical Surgical.	Nov-2020	58546	1 year	5 years	No.	
13.	Mr. MANJUNATHA.S.M.	Lecturer.	M.Sc., Nursing in Medical Surgical.	Nov-2021	23478	10 years	4 years	Yes.	
14.	Mrs. RAJESHWARI.N.	Lecturer.	M.Sc., Nursing in Medical Surgical.	Feb-2023	33984	10 years	2 year	No.	
15.	Mrs. SAVITHA.V.	Lecturer.	M.Sc., Nursing in O.B.G.	July-2010	4248	1 year	15 years	Yes.	
16.	Mrs. ROOPA.D.	Lecturer.	M.Sc., Nursing in O.B.G.	Jan-2015	32623	1 year	10 years	No.	
17.	Mrs. JAYASHREE.S.	Lecturer.	M.Sc., Nursing in O.B.G.	Jan-2020	93253	-	1 year	Yes.	
18.	Mr. MANSOOR BASHA	Lecturer.	M.Sc., Nursing in Mental Health.	Feb-2013	3436	2 years	12 years	No.	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

19.	Mr. RAVIRAJAPPA.H.	Nursing Tutor.	B.Sc., Nursing.	Dec-2009	22587	12 years	-	01.04.2013	No.	
20.	Mr. JAMALSAB KOTIHAL	Nursing Tutor.	P.B. B.Sc., Nursing.	Aug-2013	53601	1 year	-	01.03.2024	No.	
21.	Mr. VINAYA.J.	Nursing Tutor.	P.B. B.Sc., Nursing.	Nov-2021	93252	1 year	-	01.03.2024	No.	
22.	Mr. GEETHA.T.	Nursing Tutor.	P.B. B.Sc., Nursing.	Sept-2014	52046	1 year	-	01.03.2024	No.	
23.	Mr. MAHESH.G.M.	Nursing Tutor.	B.Sc., Nursing.	Aug-2012	51419	1 year	-	01.03.2024	No.	
24.	Mr. SYED IDAYATH	Nursing Tutor.	P.B. B.Sc., Nursing.	Apr-2015	91736	1 year	-	01.03.2024	No.	
25.	Ms. ANU THOMAS	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	155001	1 year	-	04.03.2024	No.	
26.	Ms. ABHIRAMI SHYJU	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	149822	1 year	-	04.03.2024	No.	
27.	Ms. LEENA JOSE	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	151767	1 year	-	04.03.2024	No.	
28.	Ms. MAREENA JOSEPH	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	151789	1 year	-	04.03.2024	No.	
29.	Ms. DINTA SHAJU	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	154916	1 year	-	06.03.2024	No.	
30.	Ms. JOSMI GOERGE	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	154820	1 year	-	06.03.2024	No.	
31.	Ms. DIVYA THOMAS	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	149809	1 year	-	06.03.2024	No.	
32.	Ms. SREEKUTTY BIJU	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	151005	1 year	-	06.03.2024	No.	
33.	Ms. REBECA SUSAN THOMAS	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	150775	1 year	-	06.03.2024	No.	
34.	Ms. VISMAYA KENNEDY	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	149501	1 year	-	09.03.2024	No.	
35.	Ms. BIJIMOL SARA JOSEPH	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	149505	1 year	-	09.03.2024	No.	
36.	Mr. ELDHO CHERIAN	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	150019	1 year	-	09.03.2024	No.	
37.	Ms. ANUSREE.A.S.	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	155074	1 year	-	09.03.2024	No.	
38.	Ms. TEENA JOSEPH	Nursing Tutor.	B.Sc., Nursing.	Oct-2023	150903	1 year	-	09.03.2024	No.	
39.	Mrs. RADHA.S.	Nursing Tutor.	P.B. B.Sc., Nursing.	Feb-2023	163731	1 year	-	01.04.2024	No.	
40.	Mr. RAGHAVENDRA.S.	Nursing Tutor.	P.B. B.Sc., Nursing.	June-2023	89626	1 year	-	01.04.2024	No.	
41.	Mr. KRISHNAMURTHY.K.	Nursing Tutor.	P.B. B.Sc., Nursing.	Feb-2023	170284	1 year	-	01.04.2024	No.	

Signature of Chairman

Signature of Member (1)

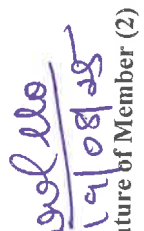
Signature of Member (2)

42.	Mr. MANJUNATHA.S.	Nursing Tutor.	P.B. B.Sc., Nursing.	June-2023	168380	1 year	-	01.04.2024	No.
43.	Mr. PRAKASH.G.D.	Lecturer.	MA – Psychology.	Feb-1992	-	-	31 years	14.10.2005	Yes.

- **Note :** Identity of faculty to be verified with Govt approved ID to be verified (Aadhar/ Voter Id /PAN card/Driving Licence). Principal cum Professor- Essential Qualification: M.Sc. (Nursing) Experience: M.Sc. (Nursing) having **total 15 years experience with M.Sc. (Nursing) out of which 10 years after M.Sc. (Nursing) in collegiate program.** Ph.D. (Nursing) is desirable For Msc Nursing and NPCC programme there should be full time Research Guides available which needs to be verified with the original Guideship letters.(Student Guide ratio to be verified as per norms of RGUHS)
- If required attach same extra pages.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

13. Particular of External Teachers (Part time) -Attach a separate sheet with this proforma. Annexure - 10

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

14. Physical Facilities :

14.1. College Building:

Annexure - 11

S. No	Details	Required	Existing	Verified by LIC team
1	Built – up area of the building (in Sq. Ft) Note: The 23,200sq.ft only for B.Sc Nursing programme with 40-60 intake. (The gazette of India extraordinary part III— section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020] 5th July, 2021 F.NO. 11-1/2019-INC.)/EC Copy/Rental Agreement registered copy	23,200sq.ft (40 – 60 intake)	36,000 Sq. Ft.	
2	CLASSROOMS Size of each classroom (sq ft) for 40 to 60 intakeB.Sc (N): 900 sq ft P.B.B.Sc (N) : 600 sq ft M.Sc (N) : 600 sq ft NPCC : 600sq ft	4 Class rooms 900sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each 2 Class rooms 600sq ft Each	4 Class rooms 1,200 Sq. Ft. Each - 2 Class rooms 600 Sq. Ft. -	
3	Administrative Facilities Office 1. Principal's Chamber 2. Vice-Principal Chamber 3. HOD 4. Professor/Assoc. Prof 5. Lecturer/ Tutors Institution office /Others 6. Office of Administrative, clerical staff and PA (s) 7. Accountants Office 8. Store Room 9. Record room 10. Room for maintenance staff 11. Xeroxing room 12. common room (Girls & Boys) 13. Multipurpose hall / Seminar hall/ examination hall 14. Toilets 15. A.V/Aids room	 300 200 5 x 200 = 1000 800+2400=3200 600 100 100 100 100 600+400= 1000 3000 1000 600	 300 Sq. Ft. 300 Sq. Ft. 1,500 Sq. Ft. 3,600 Sq. Ft. 900 Sq. Ft. 300 Sq. Ft. 300 Sq. Ft. 300 Sq. Ft. 300 Sq. Ft. 1,200 Sq. Ft. 3,200 Sq. Ft. 1,200 Sq. Ft. 600 Sq. Ft.	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

S. No	Details	Required	Existing	Verified by LIC team
4	LABORATORIES	(40-60 intake)		
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	2,400 Sq. Ft.	
	Nutrition & Community Health Nursing	1200sq.ft	1,500 Sq. Ft.	
	Obstetrics and Gynecology Laboratory	900sq.ft	1,200 Sq. Ft.	
	Pediatrics Nursing Laboratory	900sq.ft	1,200 Sq. Ft.	
	Pre-Clinical Sciences Laboratory	900sq.ft	1,200 Sq. Ft.	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1,500 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 – 11

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

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.

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

15. Vehicle Details : Enclose a copy of RC Book / Insurance / Driving License**Annexure – 12**

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving License
1 (One)	KA-17 D0035	40+1	Yes / No	Yes / No	Yes / No

16. Library facility : Enclose list of library books**Annexure - 13**

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Verified by LIC team
Required 2300 Sq.Ft	3,600 Sq. Ft.	YES ☒ No ☐			

Total No. of Nursing Books available	2376	No. of Nursing Journals subscribed	20
No. of Thesis/Research titles available	10	Is internet facility available for Students?	
No of e-books	Access through RGUHS	How many books were purchased in last financial year?	390

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Mr. MALATESH.H.	M.Lib.	28 Years.	1

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

17. Academic activities : Enclose the details of past 3 years**Annexure - 14**

Academic activities	Particulars	Remarks
Research Projects	Enclosed.	
Conferences conducted		
Conferences attended		
* Colleges should declare & attest tobacco free/drugs free campus (self declaration from to be submitted)		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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 ☒	

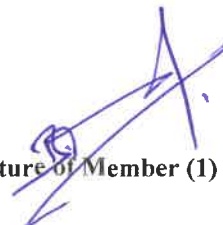
Parent Hospital.	Total No. Beds	Distance from the college	Occupancy on the day of inspection (min 75%)	Verified by LIC team
Full Name & Address of the Parent Hospital SSIMS & RC Hospital, NH-4 Bypass Road, Davangere – 577 005.	1255	300 Mtrs.	1200	
NAME OF THE TRUST/ Person owning The Hospital Bapuji Educational Association (Regd).				
Name Of The Owner Of The Trust Dr. Shamanur Shivashankarappa MLA, Davangere South.				
Affiliated hospitals- Full Name & Address of the Parent Hospital 1. Bapuji Child Health Institute & Research Center, Davangere.	200	5.00 K.Mtrs.	180	
2. Manasa Psychiatric Hospital, Shimogga.	100	96 K.Mtrs.	95	

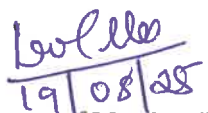
(Mention the number of beds, verify the original documents of proof regarding the ownership of hospital and the number of beds with KPMEA and Pollution control board certificate, also verify the details in online website of KSPCB & KPMEA notifying the same).

NOTE:

- If the college established, i.e., **2012-13 and before** (before 2013 -14) parent hospital rule is not applicable (F.NO.1-5/2014-INC).
- Colleges established since **2013-14** shall have 100 bedded parent hospital for opening new B.Sc Nursing Programme. But central /state govt institutions can have clinical affiliation with govt hospitals and having parent hospital is not applicable. Other specialties/facilities for clinical experience required are;-OT, Eye/ENT, Burns &Plastic, Neonatology, Communicable disease, cardiology, oncology, Neuro, Nephro, ICU/CCU. (Reference :F.NO.1-5/2014-INC dtd 29/10/2014 and F.NO.1-6/2018-INC dtd 20/04/2018).
- With effect from 2022-23 AY, Nursing colleges for **Bangalore Urban and Mangalore city** should have **200 bedded Unitary/Singleallopathic parent/own hospital**. This hospital should continue to function as parent hospital 'till the life of the nursing institution and not allow the hospital to be treated as Parent/Affiliated Hospital' to any other nursing institution and will be for minimum 30 years. (Registered MOU to be submitted in this regard). Both the college building and the parent hospital should be owned by the same trust. (Reference: The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.)
- In addition to parent hospital, to offer clinical experience/specialties the students should be sent to affiliated hospital/agencies/institutions where it is available with minimum of 50 beds. The gazette of India extraordinary part III—section 4 published by authority, [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.)


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

Note:

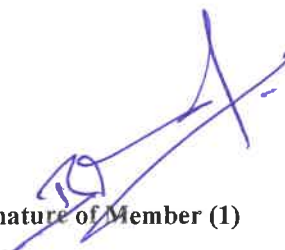
- Verify the original KPMEA documents, pollution control certificate of the hospitals to prove the ownership of the hospital and the number of beds
- Verify the MOU(undertaking) between trust member (owner of the hospital) and the trust [i.e., signed by all trustees/members/directors of Trust/Society/ 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.

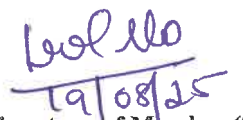
Remarks:



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	210	85%	-	-
Surgery including OT	210	87%	-	-
Obstetrics & Gynecology	120	82%	-	-
Pediatrics,	120	82%	-	-
Emergency Medicine	30	87%	-	-
Psychiatry	30	86%	100	95%

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	13	-	-	-
Minor OT	04	-	-	-
Dental, Otorhinolaryngology, Ophthalmology	120	ENT 84% Opthal 80%	-	-
Burns and Plastic	30	86%	-	-
Neonatology care unit	15	84%	-	-
Communicable disease/Respiratory medicine/TB & chest diseases	30	86%	-	-
Dermatology	30	87%	-	-
Cardiology	30	86%	-	-
Oncology	-	-	-	-
Neurology/Neuro-surgery	30	83%	-	-
Nephrology/Urology	30	83%	-	-
ICU/ICCU	15	86%	-	-
Geriatric Medicine	-	-	-	-
Any other	-	-	-	-

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

Signature of Chairman

Signature of Member (1)

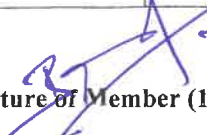
Signature of Member (2)

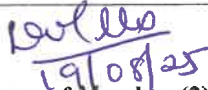
19	COMMUNITY HEALTH NURSING :	Annexure - 16
RURAL FILED		
a. Name of CHC / PHC / SC	Tholahunse Primary Health Center.	
Adopted / Affiliated	Affiliated.	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute	8 Kmts.	
b. Services Rendered by Health & Family Welfare Programmes	Yes – School Health & Health Education Programmes.	
URBAN FILED :		
a. Name of CHC / PHC / SC	S.M. Krishna Nagara Primary Health Center.	
Adopted / Affiliated	Affiliated.	
Administrated by	State Govt. ☐ Municipal Corporation ☒ Private ☐	
Distance from the Nursing Institute	10 Kmts.	
b. Services Rendered by Health & Family Welfare Programmes	Yes – RCH & Immunization Programme.	
<i>N.B.: A copy of the agreement for affiliation to the hospital and Health Centers to be attached.</i>		

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 ☐
s.	POSHE Committee	YES ☒	NO ☐
t.	Prevention of Gender harassment 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. 36,000 Sq. Ft.	
c.	Is the Hostel Owned or Rented/Leased?	Own ☒	Rented/Leased ☐
d.	Is there separate provision of Hostel for Male and Female Students?	YES ☒	NO ☐
e.	Total No. of students in the hostel	Girls : 281	Boys : 25
f.	Total No. of rooms	Girls Room: 105	Boys Room: 20
g.	Water Supply	YES ☒	NO ☐
h.	Electricity Supply	YES ☒	NO ☐
i.	Is Facilities available for outdoor games and indoor games?	YES ☒	NO ☐
j.	Is Sick room available?	YES ☒	NO ☐
k.	Whether the hostel mess is available with	YES ☒	NO ☐
l.	Safe drinking water facilities	YES ☒	NO ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

List of Annexures:

Annexure Numbers	Details	Verified as per originals documents		Signature
		Yes	NO	
Annexure - 1	Details of Trust/ Society related documents	✓		
Annexure - 2	Details of Governing Council, its meetings & Audit report of Trust	✓		
Annexure - 3	Details of any other Nursing Institution under the same Trust	✓		
Annexure - 4	Details of Affiliated fees paid receipts	✓		
Annexure - 5	Approval Status : GOK Order	✓		
Annexure - 6	Approval Status : RGUHS Notification (Last 3 Years) Approval	✓		
Annexure - 7	Approval Status : KNC Notification	✓		
Annexure - 8	Status : INC Notification	✓		
Not Applicable.	List of Post Basic B.Sc. Nursing Students as per format	Not Applicable		
Annexure - 9	List of M.Sc. Nursing Students as per format	✓		
Annexure - 10	Details of External /Part time Teachers	✓		
Annexure - 11	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 - 12	Vehicle Details : Bus	✓		
Annexure - 13	Details of List of Library Books & others	✓		
Annexure - 14	Academic Activities	✓		
Annexure - 15	Details of Clinical/Hospital Facilities- registered Hospital MOU, latest KSPCB & KPME certificate, current academic year clinical fees paid receipts from affiliated hospitals.	✓		
Annexure - 16	Details of Community Health Nursing Posting Facilities	✓		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Annexure - 17	Master Rotation plans and Time tables	✓		
Annexure - 18	List of Teachers with their Declaration forms & necessary documents	✓		
Annexure -19	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:

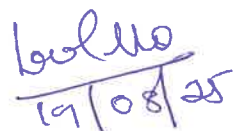
- We the LIC Inspection team member visited
 3.3. Institute of Nursing Sciences, Davangere which is running
 under trust Bapuji Educational Association, Davangere.
1. The college is having required infrastructure, departments and Labs are fulfilled as per norms. All the departments are well equipped
 2. The College is having good number of teaching faculties i.e. 43.
 3. College is having own Parent Hospital. of 1255 Bedded. well established O.T, Lab, wards, ICU etc. The hospital is having KPMI, PCA & BMV verified and affiliated to Bapuji Child Health Institute and Research Centre, PITE Holur and Urban PITE M. Krishna nagara, Having good clinical exposure for students.
 4. The college is having Bus facility for transportation having seating capacity of 42.
 5. The college is having hostel facilities for boys and girls separately.
 6. Can be considered for continuation of affiliation for the year 2021-2022.
 7. The college library is having 3.336 text books.



Signature of Chairman



Signature of Member (1)


 19/08/25

Signature of Member (2)



S. S. INSTITUTE OF NURSING SCIENCES

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Recognised by : Indian Nursing Council, New Delhi, Karnataka State Nursing Council,
Govt. of Karnataka & Affiliated to RGUHS, Bangalore

"Jnanashankara", SSIMS&RC Campus, NH-4 Bypass Road, DAVANGERE-577005 Karnataka, India
Phone : 08192-266323, 266325. E-mail : principalssins@gmail.com Website : www.ssins.co.in

Ref. No. SSINS

Date : 19/08/2025.

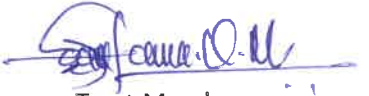
UNDERTAKING by Trust Management

I the member of the Trust **Bapuji Educational Association (Regd.)**, Davangere are submitting the affidavit to University. The trust **Bapuji Educational Association (Regd.)**, Davangere is running the college, **S.S.INSTITUTE OF NURSING SCIENCES**, Davangere Since 2004.

I confirm that all the information provided by us to the LIC team is true and correct to the best of our knowledge. I confirm that the faculty in the college is employed for full time in the college. I 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.

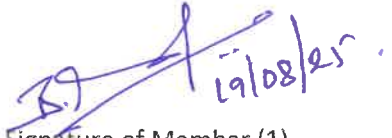
I also confirm that the college is abiding to the norms of Apex body/RGUHS, as prescribed from time to time. If any of the information declared is found to be false/misleading, Principal and the Trust management can be held responsible and suitable action can be initiated by the University.




Trust Member

Bapuji Educational Association

Signature of Chairman


Signature of Member (1)
Prof. Manu B.
Academic Council
Member. RGUHS.


Signature of Member (2)
Mrs. Wilmeera B D'nello
Subject Expert

