



03

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

INSPECTION PROFORMA FOR NURSING

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. G. Manjunath Gowda	Dr. Hemant Kumar	Dr. B.A. Yathi Kumar
Designation	RGUHS Senate Member	AC member	Principal
Address	Flat 2, 1st Main, Kamadhigalya, Bangalore - 56	D.S.C.D.S Kumar Gowda Layout	Alva's College Nursing Mooda bidri
Mobile No	9066679444	9845459666	98453-173-42
Email ID	manjunathgowda@rguhs.ac.in	delhemant@yahoo.co.in	Yathi Kumar 167@yahoo.co.in

For the Academic Year :

Date of Inspection:

(Please Tick the Appropriate Boxes Below)

Type of Inspection:	1. Fresh Affiliation		4. Re-Inspection	
	2. Continuation of Affiliation	✓	5. Surprise Inspection	
	3. Enhancement of Seats		6. Change of Name/Address	

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

1	Name of the Institution with Full Address	Prajna College of Nursing Anemahal, B.M. Road Sakaleshpura - 573134	2	Year of Establishment	2003
2	Status of the course conducting body	Government / University / Autonomous / Municipal Corporation / Missionary / Trust / Society / Company			
3	Name of the Trust & complete postal address (if private)	Prajna Education Trust Bangalore (Enclose copy of Registration documents of Society/Trust) Annexure - 1 Email: prajnacon@gmail.com Website: www.ajni.prajna.com			
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : 03 (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2			

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

5	Details of Principal/Head of the institution	Name: Suneetha Adapala Qualification: M.Sc(N) Experience: 14 years Email: suneetha@gmail.com	Mobile No: 9831528063 Residential phone No:
6	Do you have any other nursing institution other than the current institution mentioned above under the same trust?	YES ☐	NO ☒

If yes, Specify the full name of the nursing institution with full address Verify with the original TRUST document.
(Verify & enclose a copy of the registered trust Documents)

Annexure - 3

7. Affiliation Fee Paid Details:

Annexure - 4

Annexure - 4

Course Applied UG Courses	Continuation / Fresh Affiliation	Particulars of fees paid for				Amount
		Annual Fees	Renewal Fees	Administrative Charges	Helinet Inst Fee a) only for UG or b) for UG and PG courses c) NPCC	
B.Sc. Nursing	CONTINUATION	—	Rs. 195000	—	25000/-	2,21,050/-
Post Basic B.Sc. Nursing	---	—	—	—	—	—
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						
			Total (C)			
Grand Total (A+B+C)						

Online Transaction Number or Details:

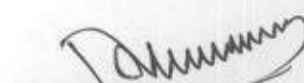
ZSBI3MI0957XN Dated 31/12/2024

Remarks:

Verify & Enclose copy of Affiliation fee paid documents


Signature of Chairman


Signature of Member (1)


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	HFW 364 MPS 2003 12/12/03 Annexure - 5	RGU/Aff/ NUR/NF169 Annexure - 6	1157-4:2004 18/06/2004 Annexure - 7		
	Affiliation Sanctioned Intake	50	50	50		
	Admissions Made for the Current Academic Year	NIL	NIL	NIL		
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7		
	Sanctioned Intake	/	/	/	/	
	Admissions Made for the Current Academic Year	/	/	/	/	
M.Sc. Nursing	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7		
	Sanctioned Intake	/	/	/	/	
	Admissions Made for the Current Academic Year	/	/	/	/	
M.Sc. NPCC	Approval Letter No. and Date	Annexure - 5	Annexure - 6	Annexure - 7		
	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.Sc Nursing	Male	NIL	21	05	03	29
	Female	NIL	26	05	07	38
Post Basic B.Sc Nursing	Male					
	Female					
M.Sc Nursing	Male					
	Female					
M.Sc NPCC	Male					
	Female					

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

No Admission Annexure - 9

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

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

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

No Admission Annexure - 10

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

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

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

Remarks:

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

12. Teaching Faculty Requirements for all Nursing Programs:

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

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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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.	Ms. Suneetha Adappa	Principal	M.Sc(N)	2011	RR And 2008 W	08	14	Yes	Suneetha
2.	Mr. Biyo Joseph	Lecturer	M.Sc(N)	2024	00058 366	01	01	Yes	Biyo
3.	Mr. Poornima T.S.	Lecturer	M.Sc(N)	2024	129162	02	01	Yes	Poornima
4.	Ms. Ganaxi C.R.	Lecturer	M.Sc(N)	2024	110106	01	01	Yes	Ganaxi
5.	Ms. Sumathi	Lecturer	M.Sc(N)	2024	129162	01	01	Yes	Sumathi
6.	Ms. Divya Naidu R.	Asst Lect	B.Sc(N)	2009	23295	16	-	Yes	Divya
7.	Ms. Divya B.D.	Nsg Tutor	Pc.B.Sc(N)	2023	234775	02	-	Yes	Divya B.D
8.	Ms. Lakshamma H.T	Nsg Tutor	Pc.B.Sc(N)	2023	131884	02	-	Yes	Lakshamma
9.	Ms. S. Asha Subari	Nsg Tutor	B.Sc(N)	2018	95209	01	-	Yes	Asha
10.	Ms. Shreuthi K.R.	Nsg Tutor	Pc.B.Sc(N)	2023	236557	01	-	Yes	K.R. Shreuthi
11.	Ms. Archana H.P.	Nsg Tutor	B.Sc(N)	2021	126326	-	-	Yes	Archana
12.	Mr. Mahesha H.V.	Nsg Tutor	Pc.B.Sc(N)	2024	224473	-	-	Yes	Mahesha H.V
13.	Mr. Puneeth H.K.	Nsg Tutor	B.Sc(N)	2018	93255	-	-	Yes	Puneeth
14.	Ms. Arpitha R.N.	Nsg Tutor	Pc.B.Sc(N)	2024	245668	-	-	Yes	Arpitha
15.	Mr. Kowshik M. Prasad	Clin. Insn	B.Sc(N)	2024	163711	-	-	Yes	Kowshik
16.	Mr. Sudeep M.S.	Clin. Insn	B.Sc(N)	2024	162487	-	-	Yes	Sudeep
17.	Mr. Divyesh Kumar K.R	Clin. Insn	B.Sc(N)	2022	131389	-	-	Yes	Divyesh Kumar
18.	Mr. Akshaya P.L.	Clin. Insn	Pc.B.Sc(N)	2024	245430	-	-	Yes	Akshaya
19.	Mr. Punitha M.S.	Clin. Insn	B.Sc(N)	2022	121614	-	-	Yes	Punitha
20.	Mr. Bhimaraya Awaxati	Clin. Insn	B.Sc(N)	2024	173047	-	-	Yes	Bhimaraya

Signature of Member (1)

Signature of Member (2)

Signature of Chairman

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

SL.No.	Name	Qualification	Subject	Number of Hours per Year	Remarks
	ENCLOSED				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) 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	28,1000 Sq ft	Available
2	CLASSROOMS Size of each classroom (sq ft) for 40 to 60 intake B.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	1050 Sq Each 5 Class rooms --- --- ---	1050 Sq ft each - 5 classrooms --- --- ---
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 13. Seminar hall 14. Toilets 15. A.N/Aids room	 300 200 5 x 200 = 1000 800+2400=3200 1000 3000 1000 600	 300 Sq.ft 300 Sq.ft 1000 Sq.ft 3200 Sq.ft 300 Sq.ft 300 Sq.ft 400 Sq.ft 300 Sq.ft 300 Sq.ft 300 Sq.ft 1000 Sq.ft 3000 Sq.ft 1000 Sq.ft 900 Sq.ft	Verified and available Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified Verified

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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

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

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

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.

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 Lience
1	KA264724	27	Yes	Yes	Yes

[Signature]
Signature of Chairman

[Signature]
Signature of Member (1)

[Signature]
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		YES ☒ No ☐	☒	☒	----
Total No. of Nursing Books available	2400	No. of Nursing Journals subscribed	05		
No. of Thesis/Research titles available	—	Is internet facility available for Students?	Yes		
No of e-books	30	How many books were purchased in last financial year?	100		

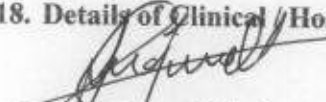
S. No.	Name of the Librarian	Qualification	Experience	Remarks
1.	Mrs. Catherine Mary.L	Diploma	3 years	present
2.				

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

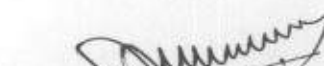
17. Academic activities :Enclose the details of past 3 years
Annexure - 15

Academic activities	Particulars	Remarks
Research Projects	Yes	Students
Conferences conducted	Yes (planning)	planning
Conferences attended	Yes	yes

18. Details of Clinical /Hospital Facilities :


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%)	Remarks
Full Name & Address of the Parent Hospital Hemavathi Hospital Hassan		50	28 kms	92%.	MOU attached
NAME OF THE TRUST/ Person owning The Hospital Pragna Education Trust Dr. Ramakrishna Butti					
Name Of The Owner Of The Trust Mr. Lakshmana. E. H.					
Affiliated hospitals- Full Name & Address of the Parent Hospital	1. Marjunatha Hospital Hassan	50	28 kms	94%.	MOU attached
	2. Mahalakshmi Marjappa Multi-Speciality Hospital	45	28 kms	92%.	MOU attached

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

NOTE:

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

Note ;

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

- Maximum of 60 seats will be sanctioned for the institution with parent hospital having less than 300 beds on the basis of teaching and physical facilities for B.Sc. (Nursing) program.
- Maximum of 100 seats will be sanctioned for the B.Sc. (Nursing) program for which institute must have parent Medical College or parent hospital having 300 beds or above. [Indian Nursing Council {revised regulations and curriculum for B.Sc. (nursing) program, regulations, 2020} 5th July, 2021 F.NO. 11-1/2019-INC.]

Note

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

Verify & Attach Clinical permission letter, fee paid receipts.

Remarks:

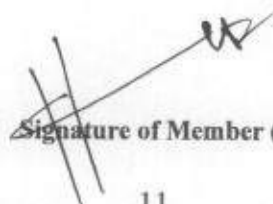
On the day of the inspection, as per the documents provided, the observation of UC is as follows -

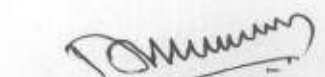
- 1) Infrastructure - Adequate as per norms.
- 2) Equipments - As per norms.
- 3) Staff - Adequate as per norms.
- 4) Clinical load - As per norms.

⇒ It can be considered for

- i) Continuation of Affiliation for existing nursing courses.


Signature of Chairman


Signature of Member (1)


Signature of Member (2)

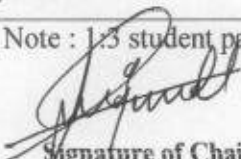
18.1. Distribution of Beds

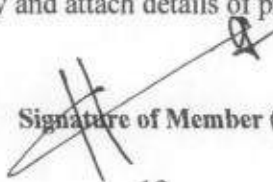
Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	10	96%	10	92%
Surgery including OT	06	94%	10	94%
Obstetrics & Gynecology	10	95%	10	94%
Pediatrics,	10	96%	10	95%
Emergency Medicine	15	94%	10	94%
Psychiatry				

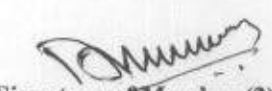
Additional/Other Specialties/Facilities for clinical experience:

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

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 :	
RURAL FILELD		
a. Name of CHC / PHC / SC	Archali, Salcaleshpura	
Adopted / Affiliated	Adopted	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute	6 kms	
b. Services Rendered by Health & Family Welfare Programmes	Health & Family Welfare	
URBAN FEILD :		
a. Name of CHC / PHC / SC	Crawford Hospital	
Adopted / Affiliated	Adopted	
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐	
Distance from the Nursing Institute	1 km	
b. Services Rendered by Health & Family Welfare Programmes	Health & Family Welfare	
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 ☐

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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		
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 :	Boys :
f.	Total No. of rooms	Girls :	Boys :
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 ☐


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


Signature of Chairman


Signature of Member (1)


Signature of Member (2)