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.Ummed Ram	Dr.Anand J Hosur	Prof.Subhashini .G
Designation	Principal	Professor	Principal
Address	Noor College of Nursing, Bangalore.	Bharatesh Homeopathi Medical College & Hospital, Belagavi.	Swamy Vivekananda College of Nursing, Bangalore
Mobile No	9448089518	9449065665	9886334068
Email ID	ramummed@gmail.com	ajhosur@gmail.com	subbethal@gmail.com

For the Academic Year : 2025-2026 *Date of Inspection:* 05/08/2025

(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	SRI KALABYRAVESHWARA SWAMY COLLEGE OF NURSING #1, 2nd Cross, CHBS 3rd Stage, Chandra Layout, Banglore-560040	2	Year of Establishment 2004
2	Status of the course conducting body	Trust		
3	(a). Name of the Trust/Society & complete postal address	SRI ADICHUNCHANANGIRI SHIKSHANA TRUST®, Nagamangala Taluk, Mandya District, Karnataka (Enclose copy of Registration documents of Society/Trust) Annexure – 1 Email:bgsceo@gmail.com	Website: www.acmbgs.org	

Ummed
Signature of Chairman
Dr. UMMED RAM

Signature of Member (1)
(Dr. Anand Hosur)

Signature of Member (2)
Prof. Subhashini.G

	(b). Name of the Owner of Trust/Society	SRI SRI SRI Dr. NIRMALANANDANATHA MAHASWAMIJI		
4	Governing Council& Audit Report of Trust	Total Number of Members in Governing Council :08 (Enclose copy of Governing Council Members & Audit report of Society/Trust)		Annexure - 2
5	Details of Principal/Head of the institution	Name: Prof. Manjula .P Qualification: M.Sc.(N) Community Health Nursing Experience: 12 Years Email: skcnprincipal@gmail.com/ manjusriparamesh@gmail.com		Mobile No: 9964535541 Office No: 080-23185229 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	UG Continuation	40,000-00	70,000-00	85,000-00	32,500-00	2,27,500-00
Affiliation Processing Fee [UG & PG Continuation]						100-00
Application Form Fee [UG Continuation]						1,000-00
Post Basic B.Sc. Nursing	Not Applicable					
Total (A)						2,28,600-00
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation			No of Seats X Prescribed fees of each faculty		
M.Sc. Nursing	1.Community Health Nursing			5 X 2000		10,000-00
	2.OBG Nursing			5 X 2000		10,000-00
	3. Medical Surgical Nursing			5 X 2000		10,000-00
	4. Child Health Nursing			5 X 2000		10,000-00
	5. Mental Health Nursing			5 X 2000		10,000-00
				Total (B)		50,000-00
Application Form Fee (P G Continuation)						1,000-00
NPCC						---
				Total (C)		---
Grand Total (A+B+C)						2,79,600-00
Online Transaction Number or Details: ZCNB951091FK5A, Dated: 23-12-2024						

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Prof. Subhashini.h.

Remarks:

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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	Aakuka 361 MPS 2003, Date: 12-05-2003 Annexure - 5	RGU/AFF/NUR /NF181/ 2022-23, Date: 29-10-2022 Annexure - 6	KSNC/2022-2023, Date: 28/11/2022 Annexure - 7	File No.: 18-15/1792, Date: 17-12-2022 Annexure - 8	Verified
	Affiliation Sanctioned Intake	60	60	60	60	
	Admissions Made for the Current Academic Year	60				
Post Basic B.Sc. Nursing	Approval Letter No. and Date	Not Applicable				
	Sanctioned Intake	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	
	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	Aakuka 262 MME 2012, 27-02-2013 Annexure - 5	RGU/AFF/NUR /NF181/ 2022-23, Date: 29-10-2022 Annexure - 6	KSNC/2022-2023, Date: 28/11/2022 Annexure - 7	File No.: 18-15/1792, Date: 17-12-2022 Annexure - 8	Verified
	Sanctioned Intake	25	25	25	10	
	Admissions Made for the Current Academic Year	07				
M.Sc. NPCC	Approval Letter No. and Date	Not Applicable				
	Sanctioned Intake	Annexure - 5	Annexure - 6	Annexure - 7	Annexure - 8	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

	Admissions Made for the Current Academic Year					

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

Programme		I year	II Year	III Year	IV Year	Total
B.Sc.Nursing	Male	22	12	04	05	43
	Female	38	47	56	55	196
Post Basic B.Sc. Nursing	Male	-	-	-	-	-
	Female	-	-	-	-	-
M.Sc. Nursing	Male	05	02	-	-	07
	Female	02	03	-	-	05
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---------
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 –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---------
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	20 to 60			40 to 60	61 to 100				40 to 60	61 to 100			
1	Principal	1	1				1									
2	Vice-Principal	1	1				-									
3	Professor	1	1-2		1*		-			1						
4	Associate Professor	2	2-4		1*		-			1						
5	Assistant Professor	3	3-8	2	3*		-			4						
6	Tutor	8-16	16-24	2-10	--		24									
	Total	**16-24**	**24-40**	**4-12**			**25**			**06**						

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)**

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			
01	Mrs. MANJULA P	Principal	M.Sc.(N) Community Health Nsg.	2013	21939	1 year 10 months	12 years 2 months	07/05/2018	Yes	
02	Mrs. DIVYA B C	Professor	M.Sc.(N) OBG Nursing	2012	16254	1 year 8 months	12 years 5 months	21/01/2019	Yes	
03	Mrs. SIPORA RANI KUMAR	Associate Professor	M.Sc.(N) Psychiatry Nursing	2015	20208645	3 years	7 years 7 months	12/04/2019	Yes	Maternity Leave
04	Mrs. GODAVARI H C	Assistant Professor	M.Sc.(N) Medical Surgical Nursing	2017	87360	1 year	5 years 7 months	01/03/2018	Yes	
05	Mrs. SUVARNA M	Assistant Professor	M.Sc.(N) Paediatric Nursing	2018	115916	3 years 10 months	4 years 6 months	20/01/2020	Yes	
06	Mrs. PUSHPA A G	Assistant Professor	M.Sc.(N) Paediatric Nursing	2019	13444	1 year	4 years 8 months	06/10/2019	Yes	Emergency Leave
07	Mrs. GOWDA GAYITHRI VISHAKANTA	Assistant Professor	M.Sc.(N) Community Health Nsg.	2018	22313	6 Years	7 Years 4 months	01/03/2021	Yes	
08	Mrs. DIVYA SHARMA	Lecturer	M.Sc.(N) Medical Surgical Nursing	2021	RR HMP 2019 8508 KAR	1 year	3 years 5 months	01/01/2022	Yes	
09	Mrs. MEERA T	Lecturer	M.Sc.(N) Medical Surgical Nursing	2023	RRKRL201 76605 KAR	1 year 11 months	2 Years 1 month	03/04/2023	Yes	
10	Ms. KOWSALYA .A	Lecturer	M.Sc.(N) Paediatric Nursing	2023	104832	1 year	2 Years 1 month	03/04/2023	Yes	
11	Ms. GAYATHRI R	Lecturer	M.Sc.(N) OBG Nursing	2023	104833	1 year	2 Years 1 month	03/04/2023	Yes	
12	Mr. MOHAN KUMAR S P	Lecturer	M.Sc.(N) Medical Surgical Nursing	2024	122410	1 year	4 months	29/01/2025	Yes	
13	Mrs. AISHWARYA J	Lecturer	M.Sc.(N) Medical Surgical Nursing	2025	114283	1 Year		01.08.2025	No	
14	Mrs. MILI ALEX	Tutor	B.Sc.(N)	2013	58629	10 years 5 months	---	19/02/2019	Yes	

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

15	Mr. SHRIDHAR P	Tutor	B.Sc.(N)	2019	100455	5 years 2 months	---	02/03/2020	Yes	
16	Mrs. LOCHARIA HARPITHA	Tutor	B.Sc.(N)	2019	101352	5 years 2 months	---	06/03/2020	Yes	
17	Mr. PHILIP PETER N	Tutor	B.Sc.(N)	2019	101412	2 years	---	01/06/2023	Yes	
18	Ms. KAVYA K M	Tutor	B.Sc.(N)	2021	120185	2 years 9 months	---	16/08/2022	Yes	
19	Ms. MAMATHA P M	Tutor	B.Sc.(N)	2022	132706	1 year 6 months	---	22/11/2023	Yes	
20	Mr. SUNDARRAJ	Tutor	B.Sc.(N)	2022	138360	1 year 9 months	---	01/09/2023	Yes	
21	Mr. SHASHIDHARA K A	Tutor	B.Sc.(N)	2022	138037	1 year 7 months	---	02/11/2023	Yes	
22	Mr. PAVITHRA M B	Tutor	B.Sc.(N)	2023	151385	1 year 6 months	---	01/12/2023	Yes	
23	Ms. AMUDHA .D	Tutor	B.Sc.(N)	2022	144610	7 months	---	14/10/2024	Yes	
24	Ms. ALIYA SIRAJ	Tutor	B.Sc.(N)	2024	165093	7 months	---	04/11/2024	Yes	
25	Mrs. MONIKA C	Tutor	B.Sc.(N)	2023	148848	5 months	---	01/01/2025	No	
26	Ms. POOJA R	Tutor	B.Sc.(N)	2023	156210	5 months	---	03/03/2025	No	
27	Ms. MONISHA P	Tutor	B.Sc.(N)	2024	179653	5 months	---	03/03/2025	No	
28	Ms. MAMATA	Tutor	B.Sc.(N)	2024	178805	5 months	---	03/03/2025	No	
29	Ms. REKHA CHIKKANNAVAR .D	Tutor	B.Sc.(N)	2021	120182	2 Years 11 months	---	01/08/2022	Yes	
30	Ms. JAYASHREE .N	Tutor	B.Sc.(N)	2024		5 months	---	03.03.2025	No	
31	Mr. CHENNAKESHAVA S	Tutor	B.Sc.(N)	2024		4 months	---	02/04/2025	No	
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Signature of Chairman **Signature of Member (1)** **Signature of Member (2)**

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- **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 - 11**

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

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		
	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	900sq ft Each	verified
	P.B.B.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	650sq ft Each	
	M.Sc (N) : 600 sq ft	**2 Class rooms** 600sq ft Each	600sq ft Each	verified
	NPCC : 600sq ft	**2 Class rooms** 600sq ft Each		
3	**Administrative Facilities**			
	Office 1. Principal's Chamber	300	472 sq ft	Verified
	2. Vice-Principal Chamber	200	312 sq ft	Verified
	3. HOD	5 x 200 = 1000	1,000 sq ft	Verified
	4. Professor/Assoc. Prof	800+2400=3200	1,605 sq ft	Verified
	5. Lecturer/ Tutors			
	Institution office /Others 6. Office of Administrative, clerical staff and PA (s)		312 sq ft	Verified
	7. Accountants Office		150 sq ft	Verified
	8. Store Room		150 sq ft	Verified
	9. Record room		150 sq ft	Verified
	10. Room for maintenance staff		150 sq ft	
	11. Xeroxing room			
	12. common room	1000	800 sq ft	Verified
	13. Seminar hall	3000	2,600 sq ft	Verified
	14. Toilets	1000	700 sq ft	Verified
	15. A.V/Aids room	600	570 sq ft	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	1200sq.ft	Verified
	Obstetrics and Gynecology Laboratory	900sq.ft	900sq.ft	Verified
	Pediatrics Nursing Laboratory	900sq.ft	900sq.ft	Verified
	Pre-Clinical Sciences Laboratory	900sq.ft	900sq.ft	Verified
	Computer Lab (1: 5 computer :student)	1500sq.ft	1500sq.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)

Annexure – 12

Building Documents:

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

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	KA-02, AA-3367	50	Yes	Yes	Yes
02	KA-53, AA-6509	50	Yes	Yes	Yes

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	1551 sq. ft.	YES ☑ No ☐	Yes	Yes	Yes

Total No. of Nursing Books available	**3,500**	**No. of Nursing Journals subscribed**	**05**
No. of Thesis/Research titles available	**250**	**Is internet facility available for Students?**	**Yes**
No of e-books	**40**	**How many books were purchased in last financial year?**	**100**

S. No.	Name of the Librarian	Qualification	Experience	Remarks
01	Mr. Ganesha	M.L.I.Sc.	7 Years	

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

Annexure - 15

Academic activities	Particulars	Remarks
Research Projects	25	
Conferences conducted	---	
Conferences attended	08	

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 **1.BGS MCH Hospital,** BGS Vignatham South Campus, Nagarur, Dasanapura, Bangalore North-562123.		600 Bedded	27 kms.	80%	Verified
NAME OF THE TRUST/ Person owning The Hospital **Sri Adichunchanagiri Shikshana Trust®**					verified
Name Of The Owner Of The Trust of Hospital **Sri Sri Sri Dr. Nirmalanandanatha Mahaswamiji**					
Affiliated hospitals- Full Name & Address of the	2. Indira Gandhi Institute of Child Health Hospital, Bengaluru.	350 Bedded	12 kms.	100%	verified
	3. Spandana Hospitals Private Limited, Bangalore.	250 Bedded	429 kms.	100%	verified
	4.Primary Health Centre, Byramangala, Ramanagara Tq. & District.	20 Bedded	20 kms.	80%	verified
	5.Community Health Centre, Bidadi.	30 Bedded	20 kms.	80%	verified
	6.BBMP, Mahalakshmipuram Maternity Referral Hospital, Shakthiganapathinagar, Basaveshwaranagar, Bangalore – 560079.	20 Bedded	2 kms.	100%	verified

(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).

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Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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 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:

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	125	120	60	55
Surgery including OT	125	110	80	70
Obstetrics & Gynecology	44	40	45	42
Pediatrics	54	50	30	25
Emergency Medicine	20	20	06	06
Psychiatry	05	04	20	19

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	05	80%	10	90%
Minor OT	05	80%	10	95%
Dental, Otorhinolaryngology, Ophthalmology	25	90%	50	100%
Burns and Plastic	05	60%	50	100%
Neonatology care unit	05	50%	50	100%
Communicable disease/ Respiratory medicine/TB & chest diseases	50	80%	100	95%
Dermatology	05	90%	100	92%
Cardiology	05	80%	50	89%
Labour Room	06	80%	400	100%
Neurology/Neuro-surgery	05	80%	100	100%
Pre Operative Ward	06	100%	100	100%
ICU/ICCU	35	80%	100	95%
Geriatric Medicine	05	80%	50	100%
Orthopedics	45	80%	15	90%
Any other/ENT	20	80%	10	80%

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)**

	COMMUNITY HEALTH NURSING :Annexure - 17
RURAL FILELD	
a. Name of CHC / PHC / SC	CHC - Bidadi
Adopted / Affiliated	Affiliated
Administrate red by	**State Govt.** ☑ **Municipal Corporation** ☐ **Private** ☐
Distance from the Nursing Institute	20 kms.
b. Services Rendered by Health & Family Welfare Programmes	Yes
URBAN FEILD :	
a. Name of CHC / PHC / SC	BBMP Mahalakshmipuram Maternity Referral Hospital, Bangalore
Adopted / Affiliated	Affiliated
Administrate red by	**State Govt.** ☐ **Municipal Corporation** ☑ **Private** ☐
Distance from the Nursing Institute	2 kms.
b. Services Rendered by Health & Family Welfare Programmes	**MCH, F.P.F.W. Immunization, Health Education, First Aid & Medical Care, Outread activities etc.**
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)**

g.	Leave record	YES ✓	NO ☐
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	**48,860 sq. ft.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 : 208**	**Boys : 03**
f.	Total No. of rooms	**Girls : 100**	**Boys : 57**
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	NA	
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:

LIC inspection on 5/8/25.

* College has infrastructure as per the norms with their own land and building.
* College has 6 labs and 8 classrooms with equipments and facilities as per norms.
* College has seminar hall Library has 3500 books with internet facility and sitting space for students full time. Principal is appointed and she is full time.
* 31 staff members available.
* College is attached with own Hospital of 600 beds. and also affiliated to other hospitals.
* College has Bus and Hostel facility.
* BSc 60 intake and MSC 25 with 5 intake in each speciality.

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

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at Sri Kalabyraveshwaraswamy College of Nursing which has applied for continuation of affiliation for the academic year 2025-26.

We have conducted LIC inspection of this college on 05.08.2025 and verified the infrastructure, Institutional facilities, Student Strength, Staff Post, Staff Biometrics, Students attendance and the original documents pertaining to institution. As per the Latest Minimum Standard Requirements (MSR) stipulated by Apex body and notification issued by RGUHS vide ref no: RGUHS/NSG/COA/2024-25, dated: 11/12/2023, we have also visited the attached hospital and verified the bed strength and clinical facility at the hospital.

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

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

Senate Member (Chairman)	***A C Member (Member)***	***Subject Expert (Member)***
Dr. UMMED RAM	(Dr. Anand Hosur)	Prof. Subhashini. G.
Signature of Chairman	**Signature of Member (1)**	**Signature of Member (2)**

Instructions for reporting of Local inspections by RGUHS

1. LIC Team shall submit an Undertaking enclosed with the LIC order of having completed the inspection as per the RGUHS norms.

2. Team shall submit the report soft & hard copy within 48 hours of the inspection failing which _____

    a. Team shall compulsorily visit the attached hospital and physically verify the bed strength and facilities provided along with the KPMEA & PCB Certificates.

    b. Team shall obtain an undertaking/affidavit from he hospital in the prescribed format.

3. Submission of softcopy of Video recording, geo tagged Photography during LIC inspection is mandatory.

4. The check list should have specific comments wherever applicable.

5. Report shall not use the words Adequate/Satisfactory/ available/sufficient etc. where the specific information is sought such as Area of the land/ Dimensions of class rooms/ number of teaching faculty/ number of class rooms/Laboratories /number of books etc. Such reports will be rejected directly without the approval.

6. All ORIGINAL documents mentioned in the checklist must be verified by the team before writing comments in the report.

7. After the verification of the original documents, photocopies of the same to be collected and the copies to be attested by the seal and signature of the Principal.

8. Original Land documents to be verified: Dishaank app may be used to verify the owner's details of the particular institution.

9. For any misleading / wrong information the whole LIC team shall be made responsible.

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

UNDERTAKING

We the Chairman and members of local inspection committee appointed by RGUHS for conduct of LIC inspection at Sri Kalabyraveshwara Swamy College of Nursing which has applied for continuation of affiliation for the academic year 2025-26.

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Senate Member (Chairman)	A C Member (Member)	Subject Expert (Member)
D. Ummedram	(Dr. Anand Hosur)	Prof. Subhashini. G.

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 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:

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

सत्यमेव जयते

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UNDERTAKING BY TRUST MANAGEMENT

NOTARY SRINIVASH ARADHYA Bangalore Urban Area H.O. Metropolis Regd. No. LOL-2021 My term expires on 7th Dec.2026 GOVT OF KARNATAKA

Statutory Alert:
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2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

I, Sri.Sri. Sowmyanatha Swamiji, Secretary, is submitting the affidavit to University.

The trust Sri Adichunchanagiri Shikshana Trust is running/managing the colleges.

1. Sri Kalabyraveshwara Swamy College of Nursing
2. Global Institute of Nursing
3. Sri Jagadguru Balagangadharanatha College of Nursing
4. Adichunchanagiri College of Nursing since **20** 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.

Bengaluru
Dated; 05-08-2025

DEPONENT

NOTARY H.S. SAKALESH ARADHYA Bangalore Metropolitan Area Reg.No. KAW 324 LCL 2021 My term expires on 7th Dec.2026 GOVT. OF KARNATAKA

SWORN TO BEFORE ME

H.S. SAKALESH ARADHYA
ADVOCATE & NOTARY
No. 1046, 6th Main,
Vijayanagar, Bangalore 560 040

- 5 AUG 2025

GOVERNMENT OF KARNATAKA HAS DISCONTINUED THE USE OF STAMP W.E.F. 1/4/2003

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Government of Karnataka

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Stamp Duty Paid By	:	BGS MCH HOSPITAL
Stamp Duty Amount(Rs.)	:	100 (One Hundred only)

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UNDERTAKING

I **Dr.Krishnamurthy.V R**, Chief of the Hospital, BGS MCH Hospital situated at Vijnatham South Campus, Dasanapura, Nagarur, Karnataka-562123.

-2-

NOTARY
KALESH ARADHYA
Bangalore Metropolitan Area
Reg.No. L-1324
Valid till expires on 7th Dec.2026
GOVT. OF KARNATAKA

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2. The onus of checking the legitimacy is on the users of the certificate.
3. In case of any discrepancy please inform the Competent Authority.

This is to confirm that our hospital BGS MCH Hospital is registered under KPMEA and PCB with **600** beds and the bonafide certificate has been attached.

This is to confirm that the hospital is functioning as affiliated/parent/own hospital for Sri Kalabyraveshwara Swamy College of Nursing.

We also confirm that our hospital is solely affiliated to Sri Kalabyraveshwara Swamy College of Nursing and is not affiliated to any other nursing college.

The information provided by us is true and correct.

Bengaluru
Dated: 05-08-2025

DEPONENT

Chief of the Hospital
BGS MCH-Hospital

NOTARY
H.S. SAKALESH ARADHYA
Bangalore Metropolitan Area
Reg.No. LAW 324
LC-2021
My term expires on 7th Dec.2025
GOVT. OF KARNATAKA

SWORN TO BEFORE ME

H.S. SAKALESH ARADHYA
ADVOCATE & NOTARY
No. 1046, 6th Main,
Vijayanagar, Bangalore 560 040

- 5 AUG 2025

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