



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

135

INSPECTION PROFORMA FOR NURSING

Details of LIC Inspectors :	Chairman	Academic Council Member	Subject Expert
Name	Dr. Sudarshan	Dr. Mahesh Selimath	Dr. Archana E
Designation	Professor	Prof. Head	VICE PRINCIPAL
Address	1516 Dental colony Bangalore	AMV PH Hubli - 24	MYTHRI COLLEGE OF NURSING SHIVAMOGGA
Mobile No	9449104316	9739106823	9900476286
Email ID	Sudarshan78@gmail.com	dmaheshselimath@gmail.com	archanaeervan16@gmail.com

For the Academic Year : 2025-26

Date of Inspection: 12-08-2025

(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	

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	Govt. College of Nursing Chittarahalli Industrial Area Holenarasipura Taluk Hassan Dist	2	Year of Establishment	2006
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)	(Enclose copy of Registration documents of Society/Trust) Annexure - 1			
		Email: gchhnpns535@gmail.com	Website: http://www.hins-nursing.org		
4	Governing Council & Audit Report of Trust	Total Number of Members in Governing Council : (Enclose copy of Governing Council Members & Audit report of Society/Trust) Annexure - 2			

Signature of Chairman:

Signature of Member (1)

Signature of Member (2)

Details of Principal/Head of the institution Name: CHANDRASHEKAR H Qualification: MSc (N) Experience: 19 years Email: chshdvg@gmail.com		Mobile No: 9480376925 Office No: 08175-272645 Fax No: 08175-272645 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:

		Particulars of fees paid for				Amount
Course Applied UG Courses	Continuation / Fresh Affiliation	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 Affiliation	—	1000	—	Basic BSc(N)	138600
Post Basic B.Sc. Nursing	Continuation Affiliation	—	1000	—	PBBSc(N) MSc(N)	11600 2100
Total (A)						141800
PG Course:- (M.Sc. Nursing)	P G Continuation/Fresh Affiliation	No of Seats X Prescribed fees of each faculty				
	1. Medical Surgical Nursing	04			1000/-	
	2. ORG	04				
	3. Community Health Nursing	04				
	4.					
	5.					
Total (B)						
NPCC						
Total (C)						
Grand Total (A+B+C)						142800/-
Online Transaction Number or Details: 1) YSB I 1647656403 2) YSB I 1646802639						

Remarks:

Copy Enclosed

Verify & Enclose copy of Affiliation fee paid documents

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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 157 MME 2005 29-04-2006 Annexure - 5	RGU/AFF1 NVR/NF 285/2022-23 07/11/2022 Annexure - 6	Copy Enclosed Annexure - 7	Copy Enclosed Annexure - 8	
	Affiliation Sanctioned Intake	60	60	60	60	
	Admissions Made for the Current Academic Year	60+6 from PMSSS=66	—	—	—	
Post Basic B.Sc. Nursing	Approval Letter No. and Date	HFW 125 MME 2001 10-08-2011 Annexure - 5	RGU/AFF1 NVR/NF 285/2022-23 07/11/2022 Annexure - 6	Copy Enclosed Annexure - 7	Copy Enclosed Annexure - 8	
	Sanctioned Intake	30	30	30	30	
	Admissions Made for the Current Academic Year	10	—	—	—	
M.Sc. Nursing	Approval Letter No. and Date	HFW 125 MM 2001 10-08-2011 Annexure - 5	RGU/AFF1 NVR/NF 285/2022-23 07/11/2022 Annexure - 6	Copy Enclosed Annexure - 7	Copy Enclosed Annexure - 8	
	Sanctioned Intake	12	12	12	12	
	Admissions Made for the Current Academic Year	7	—	—	—	
M.Sc. NPCC	Approval Letter No. and Date	— Annexure - 5	— Annexure - 6	— Annexure - 7	— Annexure - 8	
	Sanctioned Intake	—	—	—	—	
	Admissions Made for the Current Academic Year	—	—	—	—	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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	11	16	21	19	67
	Female	48	52	41	41	182
Post Basic B.Sc Nursing	Male	2	1			3
	Female	9	5			14
M.Sc Nursing	Male	3	1			4
	Female	5	0			5
M.Sc NPCC	Male	—	—	—	—	—
	Female	—	—	—	—	275

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

Annexure - 9

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

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

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

Annexure -10

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

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

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

Remarks:

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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				1	—	—	—						
3	Professor	1	1-2		1*		1	—	—	1	—					
4	Associate Professor	2	2-4		1*		2	—	—	1	—					
5	Assistant Professor	3	3-8	2	3*		7	—	2	3	—					
6	Tutor	8-16	16-24	2-10	—		15	—	10	—	—					
	Total	16-24	24-40	4-12			27	—	12	5	—					

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	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.	CHANDRASHEKAR HADAPAD	Principal	MSc(N)	2006	12554	19 yrs	12 yrs	Yes	
2.	Shibaja K.G	Vice principal	MSc(N)	2006	20930	19 yrs	12 yrs	Yes	
3.	Saravathi P.C	professor	MSc(N)	2009	18771	17 yrs	12 yrs	Yes	
4.	Gurekha S.M	Asst. prof	MSc(N)	2012	4286	8 yrs	5 yrs		
5.	Shanthi P.R	Asst. prof	MSc(N)	2016	35203	9 yrs	7 yrs		
6.	Ramu.V.M	Asst. prof	MSc(N)	2019	11682	17 yrs	-		
7.	P.S. Harina Kumari	Asst. prof	MSc(N)	2015	22960	5 yrs	2 yrs	Yes	
8.	G.N. Raghuram	Asst. prof	MSc(N)	2015	23875	5 yrs	2 yrs		
9.	Mahantesh Sarabani	Asst. prof	MSc(N)	2015	33589	5 yrs	2 yrs	Yes	
10.	Manjunatha Rao S	Asst. prof	MSc(N)	2013	23326	1 yrs	-	Yes	
11.	Shadaktsharappa B.K	Asst. prof	MSc(N)	2016	5485	1 yr	-	Yes	
12.	Noeline nima C prasad	Asst. prof	MSc(N)	2018	48075	1 yr	-	Yes	
13.	Saravamma H.S	Principal	PCBSc(N)	2006	11681	17 yrs	-	Yes	
14.	Lolakshi S.H	-	PCBSc(N)	2007	15872	7 yrs	-		
15.	Kareika H.P	-	BBSc(N)	2007	10706	7 yrs	-		
16.	Vijay Kumar K	-	BBSc(N)	2015	86197	4 yrs	-		
17.	Somashekhar H.P	-	BBSc(N)	2014	13127	3 yrs	-		
18.	Shalini K.P	-	BBSc(N)	2016	80439	3 yrs	-		
19.	Yadhaswini S.R	-	BBSc(N)	2016	80257	3 yrs	-		
20.	Jeena V.C	-	BBSc(N)	2013	135881	3 yrs	-		
21.	Roopa S	-	BBSc(N)	2012	51854	3 yrs	-		
22.	Lakshmi Devi G	-	BBSc(N)	2020	87728	3 yrs	-		

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Date		Time		Location		Remarks	
1900	11-20	11:00	11:15	1000	1000	1000	1000
1900	11-20	11:15	11:30	1000	1000	1000	1000
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1900	11-20	11:45	12:00	1000	1000	1000	1000
1900	11-20	12:00	12:15	1000	1000	1000	1000
1900	11-20	12:15	12:30	1000	1000	1000	1000
1900	11-20	12:30	12:45	1000	1000	1000	1000
1900	11-20	12:45	13:00	1000	1000	1000	1000
1900	11-20	13:00	13:15	1000	1000	1000	1000
1900	11-20	13:15	13:30	1000	1000	1000	1000
1900	11-20	13:30	13:45	1000	1000	1000	1000
1900	11-20	13:45	14:00	1000	1000	1000	1000
1900	11-20	14:00	14:15	1000	1000	1000	1000
1900	11-20	14:15	14:30	1000	1000	1000	1000
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1900	11-20	15:00	15:15	1000	1000	1000	1000
1900	11-20	15:15	15:30	1000	1000	1000	1000
1900	11-20	15:30	15:45	1000	1000	1000	1000
1900	11-20	15:45	16:00	1000	1000	1000	1000
1900	11-20	16:00	16:15	1000	1000	1000	1000
1900	11-20	16:15	16:30	1000	1000	1000	1000
1900	11-20	16:30	16:45	1000	1000	1000	1000
1900	11-20	16:45	17:00	1000	1000	1000	1000
1900	11-20	17:00	17:15	1000	1000	1000	1000
1900	11-20	17:15	17:30	1000	1000	1000	1000
1900	11-20	17:30	17:45	1000	1000	1000	1000
1900	11-20	17:45	18:00	1000	1000	1000	1000
1900	11-20	18:00	18:15	1000	1000	1000	1000
1900	11-20	18:15	18:30	1000	1000	1000	1000
1900	11-20	18:30	18:45	1000	1000	1000	1000
1900	11-20	18:45	19:00	1000	1000	1000	1000
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1900	11-20	20:00	20:15	1000	1000	1000	1000
1900	11-20	20:15	20:30	1000	1000	1000	1000
1900	11-20	20:30	20:45	1000	1000	1000	1000
1900	11-20	20:45	21:00	1000	1000	1000	1000
1900	11-20	21:00	21:15	1000	1000	1000	1000
1900	11-20	21:15	21:30	1000	1000	1000	1000
1900	11-20	21:30	21:45	1000	1000	1000	1000
1900	11-20	21:45	22:00	1000	1000	1000	1000
1900	11-20	22:00	22:15	1000	1000	1000	1000
1900	11-20	22:15	22:30	1000	1000	1000	1000
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1900	11-20	22:45	23:00	1000	1000	1000	1000
1900	11-20	23:00	23:15	1000	1000	1000	1000
1900	11-20	23:15	23:30	1000	1000	1000	1000
1900	11-20	23:30	23:45	1000	1000	1000	1000
1900	11-20	23:45	24:00	1000	1000	1000	1000

23.	Reshna GL	clinical instructor	P.B.R.C.W	2020	64058	3yr	-	10-5-21	
24.	Asha HR	-	-	2021	81301	3yr	-	10-7-24	Asla HR
25.	Tulasi Kumari S	-	-	2021	83619	1yr	-	10-7-24	Tulasi
26.	Varalakshmi KS	-	-	2016	174389	1yr	-	10-7-2024	
27.	Ani Kumari	-	-	2015	158164	1yr	-	23-9-24	dhund
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Signature of Chairman

Signature of Member (1)

Signature of Member (2)

2027.5

11/11

Time	Lat	Long	Alt	Wind	Temp	Pressure	Remarks
10:00	27° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
10:30	27° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
11:00	27° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
11:30	27° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
12:00	28° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
12:30	28° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
13:00	28° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
13:30	28° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
14:00	29° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
14:30	29° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
15:00	29° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
15:30	29° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
16:00	30° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
16:30	30° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
17:00	30° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
17:30	30° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
18:00	31° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
18:30	31° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
19:00	31° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
19:30	31° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
20:00	32° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
20:30	32° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
21:00	32° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
21:30	32° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
22:00	33° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear
22:30	33° 15' N	159° 15' W	1000	10	21.0	1010.0	Clear
23:00	33° 30' N	159° 30' W	1000	10	21.0	1010.0	Clear
23:30	33° 45' N	159° 45' W	1000	10	21.0	1010.0	Clear
24:00	34° 00' N	159° 00' W	1000	10	21.0	1010.0	Clear

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

SLNo.	Name	Qualification	Subject	Number of Hours per Year	Remarks
			Copy enclosed		

14. Physical Facilities :

14.1. College Building:

Annexure - 12

S. No	Details	Required	Existing	Remarks
1	Built - up area of the building (in Sq. Ft)	23,200sq.ft	1,30,702.5 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			
2	CLASSROOMS			
	Size of each classroom (sq ft) for 40 to 60 intake B.Sc (N): 900 sq ft	4 Class rooms 900sq ft Each	4 class Rooms 1015.2 Sq.ft each	
	P.B.B.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	2 class Rooms 1015.2 Sq.ft each	
	M.Sc (N) : 600 sq ft	2 Class rooms 600sq ft Each	2 class Rooms 600 Sq.ft each	
	NPCC : 600sq ft	2 Class rooms 600sq ft Each	—	
	Administrative Facilities			
	Office			
	1. Principal's Chamber	300	313.7 Sq.ft	
	2. Vice-Principal Chamber	200	213.7 Sq.ft	
	3. HOD	5 x 200 = 1000	323.7 Sq.ft each	6 Rooms
	4. Professor/Assoc. Prof	800+2400=3200	490 Sq.ft each	4 Rooms
	5. Lecturer/ Tutors		323.7 Sq.ft each	4 Rooms
	Institution office /Others			
	6. Office of Administrative, clerical staff and PA (s)		156.25 Sq.ft	
3	7. Accountants Office		323.7 Sq.ft	
	8. Store Room		213 Sq.ft	
	9. Record room		213 Sq.ft	
	10. Room for maintenance staff		213 Sq.ft	
	11. Xeroxing room		213 Sq.ft	
	12. common room	1000	490 Sq.ft each	2 Rooms
	13. Seminar hall	3000	3236.2 Sq.ft	
	14. Toilets	1000	17.5 Sq.ft each	Male - 10 Female - 10
	15. A.V/Aids room	600	658.5 Sq.ft	

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

Handwritten text at the top center, possibly a title or date.

Date		Description		Amount	
1900	Jan 1	Balance		100.00	
1900	Jan 2	...		...	
1900	Jan 3	...		...	
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1900	Jan 5	...		...	
1900	Jan 6	...		...	
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S. No	Details	Required	Existing	Remarks
4	LABORATORIES			
	Nursing Foundation including Adult Health Nursing & Advanced Nursing Lab	1600 sq.ft	1015.2 sq.ft + 1015.2 sq.ft	2 Rooms
	Nutrition & Community Health Nursing	1200sq.ft	1015.2 + 1015.2 sq.ft	2 Rooms
	Obstetrics and Gynecology Laboratory	900sq.ft	1015.2 sq.ft	
	Pediatrics Nursing Laboratory	900sq.ft	1015.2 sq.ft	
	Pre-Clinical Sciences Laboratory	900sq.ft	1015.2 sq.ft	
	Computer Lab (1: 5 computer :student)	1500sq.ft	1015.2 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 - 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	
5.	Whether Safe drinking water supply in available	YES	✓	NO	

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, 2021 F.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

Copy Enclosed

Annexure - 13

Total Number of Vehicles	Vehicle Registration Number	Seating Capacity	RC Book	Insurance	Driving Licence
1	KA13-G1817	46	Yes / No	Yes / No	Yes / No

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

16. Library facility : Enclose list of library books

Annexure - 14

Library Facilities	Existing Size in Sq ft	Separate Library	Ventilation	Lighting	Remarks
Required 2300 Sq.Ft	3226.2 Sq ft	YES ☒ No ☐	Yes	Yes	Good
Total No. of Nursing Books available	1880	No. of Nursing Journals subscribed		06	
No. of Thesis/Research titles available	157	Is internet facility available for Students?		Yes	
No of e-books	100	How many books were purchased in last financial year?		Nil	

S. No.	Name of the Librarian	Qualification	Experience	Remarks
1	Buraksha H R	B Lib	2 years	Work is Satisfactory

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	Details Enclosed	
Conferences conducted	1) ENLS program Conducted 2) Workshop conducted on HWM 3) Workshop conducted on AV/ARDS 4) Workshop Conducted on Research	
Conferences attended	At JSS College of Nephrology Mysore Topic: Cardiac Emergencies	

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) Govt General Hospital, Holenarasipura	250	1.5 km		
2) Sri Chamarajendra Hospital	750	35 km		
NAME OF THE TRUST/ Person owning The Hospital				
State Govt	—	—		
Name Of The Owner Of The Trust				
	—	—		
Affiliated hospitals- Full Name & Address of the Parent Hospital	1 Dharwad Institute of Mental Health - Neuro Sciences, Dharwad	325	393 km	
	2			

(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/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 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

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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10/31/77	10/31/77	10/31/77	10/31/77	10/31/77

The following is a list of the items which have been received from the various sources mentioned in the preceding pages. The items are listed in the order in which they were received, and the amount of each item is given in the column headed "AMOUNT". The total amount of the items is given in the column headed "TOTAL".

The following is a list of the items which have been received from the various sources mentioned in the preceding pages. The items are listed in the order in which they were received, and the amount of each item is given in the column headed "AMOUNT". The total amount of the items is given in the column headed "TOTAL".

The following is a list of the items which have been received from the various sources mentioned in the preceding pages. The items are listed in the order in which they were received, and the amount of each item is given in the column headed "AMOUNT". The total amount of the items is given in the column headed "TOTAL".

10/31/77

Note ;

- 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.

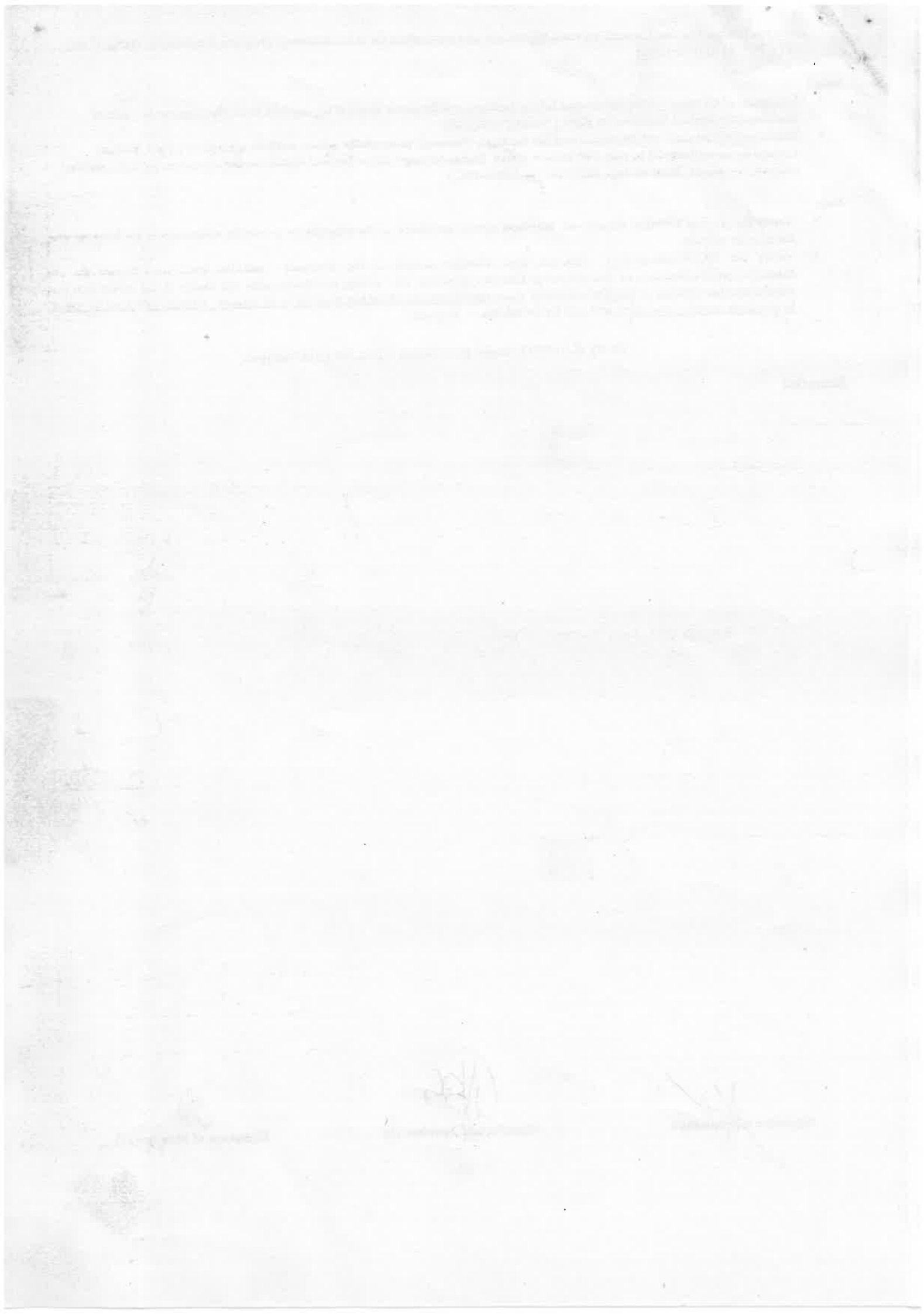
Verify & Attach Clinical permission letter, fee paid receipts.

Remarks:

Signature of Chairman

Signature of Member (1)

Signature of Member (2)



18.1. Distribution of Beds

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Medical	$60+150=210$	$58+148=206$	—	—
Surgery including OT	$50+150=200$	$46+147=193$	—	—
Obstetrics & Gynecology	$30+90=120$	$27+89=116$	—	—
Pediatrics,	$30+90=120$	$28+88=116$	—	—
Emergency Medicine	$6+0=6$	—	—	—
Psychiatry	$0+30=30$	$30+28=58$	325	320

Additional/Other Specialties/Facilities for clinical experience:

Clinical Areas	Parent		Affiliated	
	No. of Beds	Bed Occupancy	No. of Beds	Bed Occupancy
Major OT	$02+20=22$	$02+19=21$	—	—
Minor OT	$04+0=04$	$02+0=02$	—	—
Dental, Otorhinolaryngology, Ophthalmology	$20+50=70$	$18+48=66$	—	—
Burns and Plastic	$02+20=22$	$04+18=19$	—	—
Neonatology care unit	$05+0=05$	$04+0=04$	—	—
Communicable disease/ Respiratory medicine/TB & chest diseases	$10+20=30$	$08+19=27$	—	—
Dermatology	$04+40=40$	$04+40=40$	—	—
Cardiology	—	—	—	—
Oncology	—	—	—	—
Neurology/Neuro-surgery	—	—	—	—
Nephrology/Urology	—	—	—	—
ICU/ICCU	$10+30=40$	$08+28=36$	—	—
Geriatric Medicine	—	—	—	—
Any other	$21+60=81$	$20+59=79$	—	—

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 - 17

RURAL FILED

a. Name of CHC / PHC / SC	Mudalahippe
Adopted / Affiliated	Affiliated
Administrated by	State Govt. ☒ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	10 KM
b. Services Rendered by Health & Family Welfare Programmes	Yes

URBAN FEILD :

a. Name of CHC / PHC / SC	Halekole
Adopted / Affiliated	Affiliated
Administrated by	State Govt. ☐ Municipal Corporation ☐ Private ☐
Distance from the Nursing Institute	13 km
b. Services Rendered by Health & Family Welfare Programmes	Yes

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 ☐

Signature of Chairman

Signature of Member (1)

Signature of Member (2)

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	Sq.ft 32124.5	
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 : 178	Boys : 75
f.	Total No. of rooms	Girls : 46	Boys : 46
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)

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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	Govt	
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)

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Note: Verify & attach Relevant Documents (include staff declaration forms) along with this report. The recordings of the report should be clearly legible. LIC team is solely responsible for the details & remarks noted in the LIC format.

Observations:

The LIC Team Visited Govt College of Nursing Holenarasipura on 12/8/20 as a part of LIC Inspection for Continuation of Affiliation with in function under the Govt of Karnataka. In its own building

Physical Facilities: College is allotted with 60 seats of BSc N 30 PRBS and 12 MSC seats annually the college has 4 class Room of 1015 sqft and BSc N, 1015 sqft 2 class Room for PRBS and 600 sqft 2 class Room for MSC program. College has parent Govt District Hospital of Holenarasipura.

Library: 3226 sqft library present with 1880 Text Books and Electronic Computer present.

Teaching facilities: There are 27 facilities present in the college out of which there are 12 MSC teachers for teaching the students and college has 1 large Bus for transportation.

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 _____ which has applied for continuation of affiliation for the academic year 2024-25.

We have conducted LIC inspection of this college on _____ 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.

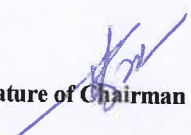
The information recorded by us in the LIC reports is true and correct.

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


Senate Member
(Chairman)


A C Member
(Member)

 [Alchano, E]
Subject Expert
(Member)


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 the 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: Dishank 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

I Mr. Chandrashekar Hadapad principal government college of nursing, Holenarasipura I am submitting affidavit to the RGUHS, Bangalore.

The government college of nursing is a government institution, it is functioning since 2006.

I inform that all the information provided by me to the LIC team is true and correct to the best of my knowledge.

I confirm that the faculty in the college is employed for full time in the college.

I also confirm that the college is abiding to the norms of apex body/RGUHS, Bangalore as prescribed from time to time.

If any of the information declared is found to be false, I will be held responsible and suitable action can be initiated by the university.




Principal
Govt. College of Nursing
Holenarasipura