Sukkur Institute of Nursing and Allied Health

Sciences SUKKUR, SINDH - PAKISTAN

**APPLICATION FORM**

Form Fee 1500/- **A/C:03313826499,** A/C Title **/** Name Faiz Ahmed

Transaction I’D\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ through Easypaisa Jazz Cash.  Others (Any other Proof of Transaction)

Admission in  BS Nursing,  BSc Nursing,  LHV,  Midwifery

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| DISTRICT |  |  |  |  |  |  |  |  |  |  | Male |  | Female |

Note: Candidates are advised to complete all columns of the form.

Please read the instructions carefully;

The Director,

Sukkur Institute of Nursing and Allied Health Sciences, Sukkur

I request for the admission in ……………………. for the Academic Session 2022-23

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 01. PERSONAL INFORMATION | | | | | | | | | | | | | | | | |
| Name of applicant | |  | | | | | | | | | | | | | | |
| (BLOCK LETTERS) | |  | | | | | | | | | | | | | | |
| Father's Name | |  | | | | | | | | | | | | | | |
| Date of Birth | |  | | CNIC Number | | | |  | | | Contact | | | | |  |
| 02. ADDRESSES | | | | | | | | | | | | | | | | |
| Present | |  | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| Permanent | |  | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | |
| 03. ACADEMIC QUALIFICATION | | | | | | | | | | | | | | | | | | |
| Certificate / Degree | Name of Board | | | | Obtained Marks | | | | Division | | | Annual / Supplementary | | | | | |
| Graduation |  | | | |  | | | |  | | |  | | | | | |
| Intermediate |  | | | |  | | | |  | | |  | | | | | |
| Matriculation |  | | | |  | | | |  | | |  | | | | | |
| 04. ONLY FOR BSc POST RN | | | | | | | | | | | | | | | | | |
| Certificate / Degree | | | Name of Board | | | | Obtained Marks | | | Division | | | | Annual / Supplementary | | | | |
| Diploma in General Nursing | | |  | | | |  | | |  | | | |  | | | | |
| One Year Diploma (Specialist) | | |  | | | |  | | |  | | | |  | | | | |
| Others | | |  | | | |  | | |  | | | |  | | | | |
| 05. CERTIFICATE FROM PRINCIPAL OF THE COLLEGE LAST ATTENDED | | | | | | | | | | | | | | | | | | |
| By the principal of |  | | | | | | | | College | | |  | | | | | |
| This is to certify that Ms./Mr. | | | | | |  | | | | | | | | | | | | |
| D/O, S/O |  | | | | | | | | was student of this college admitted into | | | | | | | | |
| class |  | | | | From | | | |  | | | To |  | |

|  |
| --- |
| Note: Students & Parents are required to carefully read the following before signing the form. |
| * Bi-monthly (Two) fee will be paid in advance. |
| * Admission fee, monthly tuition fee, enrollment & examination fee and other fees are not refundable. |
| * No cash payment should be made in the office. All kinds of fee must be deposited in designated banks. |
| * Students are required to deposit copy of admission fee and monthly fee challans in the sukkur institute office. |
| * Bi-monthly Tuition fee should be paid in advance by the 10th of each month. After due date late payment fine of Rs. 200/= will be charged |
| * Student will only be allowed to sit in annual / supplementary / examination after clearance / payment of tuition fee for 12 months. Enrollment, examination fee and any other fee. |
| * Certificate will only be issued after clearance of all sukkur Institute dues. |
| * Right of granting admissions are reserved with the BIP management and admission are made strictly on merit basis. |

|  |
| --- |
| CERTIFICATE FORM THE PARENTS / GUARDIAN |

Certificate that the particulars, especially date of birth given is correct to the best of my knowledge or official records,

I have read and understood above instruction / rules about payment of fee and will abide by them by signing this declaration.

I understand that the students retention in sukkur Institute will be determined thorough periodical evaluation and 70% attendance by the administration.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Name of parent/Guardian Signature |  | Signature of Student |
| Submitting the admission form |  |  |

|  |
| --- |
| For Official Use only: |

Admission Allowed / Not Allowed

|  |  |
| --- | --- |
| Trade: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Course: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Category: \_\_\_\_\_\_\_\_\_\_\_\_ | Certificate Awarded by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |