NIGHTINGALE INSTITUTE OF NURSING & HEALTH SCIENCES

ninhsinstitute@gmail.com +92-946-730050 - +92-347-9440300
Madyan Road, Near Charbagh Police Station, Charbagh Swat, KP

S. No_____

Form No:

Submission Date:

PASTE PASSPORT SIZE PHOTOGRAPH

ADMISSION FORM

☐ BSN (4 Years) ☐ Post RN (2 Years) ☐ LHV (2 Years) ☐ Ultrasound (1 Year)

1. PERSONAL DETAILS

Name:.....

Father Name.....

Sex **Male** ☐ **Female** ☐ **Date of Birth** ☐☐-☐☐-☐☐☐☐

Permanent Address.....

.....

Domicile:.....**CNIC** ☐☐☐☐☐-☐☐☐☐☐☐☐-☐

Mobile No 1 ☐☐☐☐☐☐☐☐☐☐ **Mobile No 2** ☐☐☐☐☐☐☐☐☐☐

Email ID.....

Local Guardian Name.....

Address.....

2. ACADEMIC QUALIFICATION

Name of Examination	Name of Board	Year of Passing	Roll No	MARKS OBTAIN/ TOTAL MARKS	% OF MARKS	DIVISION	SUBJECTS OFFERED
SSC							
HSSC							
KMU CAT							
GENERAL DIPLOMA MARKS							
ANY OTHER							

3. REFERENCE

Reference # 01	Reference # 02
Nam:.....	Nam:.....
Address.....	Address.....
.....	.....
Employer.....	Employer.....
Designation.....	Designation.....
Email.....	Email.....
Mobile No.....	Mobile No.....

DECLARATION BY THE APPLICANT

I hereby declare that I have read and understood the conditions of eligibility and terms and conditions for the programmer for which I seek admission. I have been provided with the necessary information and have been explained in this regard.
In the event of my any information found incorrect or misleading, my candidature shall be liable to cancellation by the institute at any time and I shall not be entitled for the refund of any fee paid by me to the institute.

Date:

Place:

Signature of Candidate

Terms & Conditions:

NINHS reserves the right of admission.

1. In case of any misconduct in the classroom the institute has every right to cancel the student's admission.
2. Fees once paid will not be refunded. In case you do not pay the balance by the stipulated date, you shall not be allowed to continue the course. The amount paid for is against part / full payment for the course only.
3. In case of NP Students Only the Tuition and Exam will be paid for that specific semester. No other fee will be paid to the college.
4. All copyrights regarding the materials used in this program are reserved by NINHS.
5. Students once enrolled for a course / program will not be permitted to change their course / program and as such no adjustment or refund in fees would be made. Furthermore if the student wishes to change the course / program new admission on that regard is required with all the formalities and fees.
6. A minimum of 75% attendance is must & required for you for shaping your career in the field. Candidate who are not able to maintain this 75% of attendance are deteriorating their career at their own will.
7. Students have to arrange their own internship or placement in their concerned field by themselves and inform the institute. The institute may provide guidelines or help to students in arranging the same. Student is required to fill up the same.

Guardian's Signature

Student's Signature

ELIGIBILITY CRITERIA

BSN Generic 4 years
Matric Science
Intermediate Science (Pre-Medical) with 50% Marks in overall subjects

Post Rn 2 years
Matric Science
Three year General Nursing Diploma
1 year Specialty

LHV 2 years
Matric Science with 45% Marks in overall subjects
Only Female

ENCLOSURES (PHOTOCOPIES 4 SETS VERIFIED AND ATTESTED)

BSN			
SSC Certificate/ SSC Marks Sheet		Domicile Certificate	
HSSC Certificate/ HSSC Marks Sheet		Character Certificate	
KMU CAT Entrance Test		Affidavit	
Migration Certificate		15 Photographs	
CNIC/Form B			

Post RN			
SSC Certificate / SSC Marks Sheet		Domicile Certificate	
General Nursing Diploma/Marks Sheet 1st 2nd & 3rd Year		1 Years' Experience Certificate	
Specialty mark sheet		Character Certificate	
CNIC		PNC License	
		30 Photographs	

LHV			
SSC Certificate/ SSC Marks Sheet		Domicile Certificate	
CNIC/Form B		Character Certificate	
30 Photographs			

FOR OFFICE USE ONLY

Mr/Mrs/Ms:_____**Father Nam**_____

Form No_____**Date Received**_____

Admin Sign_____