MAHADEVI BIRLA INSTITUTE OF NURSING & CLINICAL TECHNOLOGY

(A unit of: **Sarala Birla University**)

**4 Years (48 Months) B.Sc. Nursing Course**

1. **Duration of Course**: - **4 Years (Session**- **Oct. 2024-Sept .2028**

**2. Admission Terms & Condition:-**

* The minimum age for admission shall be **17** years on 31st December of the year in which admission is sought.
* The minimum education 10+2 class passed with science (PCB) & English Core/ English Elective with aggregate of 45% marks from recognized board under AISSCE/CBSE/ ICSE/SSCE/HSCE or other equivalent Board.
* Student shall be medically fit**.**
* Students appearing in 10+2 examination in Science conducted by National Institute of open School with 45% marks.
* Student shall be admitted once in a year.

**3. How to Apply:-**

* Submit your Completed application form along with **Xerox Copy of Matric / Inter Mediate – Mark-Sheet, Admit Card and Provisional Certificate/Cast Certificate/Residential Certificate, Aadhar with D/D** OR **Cash Payment Rs. 1000/-** towards **Mahadevi Birla Institute of Nursing& Clinical Technology** Entrance Fees at the time of the submission of the Form.

**4. Medical Fitness:-**

* Admission is confirmed after medical examination report.

**5. Fees structure:-**

* 1st Year ... ... 145000/-
* 2nd Year ... ... 95000 /-
* 3rd Year ... -- 95000 /-
* 4th Year ... ... 95000 /-

 **430000/-**

**6. Payment Schedule:-**

* At the time of Admission ... ... Rs. **50000**/-

**7. Contact Person for Admission**

**Mr. Ashutosh Dwivedi** – **Administrator Co- Ordinator** Phone no.**09162898365**, **7903310832**

**NB**:**.**

 **2-** B.Sc **Ist** Year course fee Rs-**145000**/ (One Lac Fourty Five Thousand only),**IInd** Year Rs. **95000**/ (Ninety Five Thousand only) **IIIrd** Year Rs. **95000**/ (Ninety Five Thousand only) **IVth** Year Rs. **95000**/ (Ninety Five Thousand only) **Total** Rs. **430000**/-(Four Lac Thirty Thousand only)

[**www.mbinct.com**](http://www.mbinct.com/)

Birla Knowledge City, Village-Arra, P.O.-Mahilong, P.S.-Tatisilway, Ranchi-835103(Jharkhand ) Phone:9162898365/0651-2265823,Website:[www.mbinct.com,](http://www.mbinct.com/)Email Id:mbinctranchi@gmail.com

MAHADEVI BIRLA INSTITUTE OF NURSING & CLINICAL TECHNOLOGY

(A unit of: **Sarala Birla University**)

Affix

Passport Size

Recent Colour Photograph

**Four Years (48 Months) Course in B.Sc. Nursing**

**(To be filled by the Applicant) Session-2024-2028**

**Form No. Date Issued by**

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**Name**  :**-**

**(In capital Letters)**

**Father’s Name:-**

**Mother’s Name :-**

|  |  |  |
| --- | --- | --- |
| **Date** | **Month** | **Y e a r** |
|  |  |  |  |  |  |  |  |
| Married | Unmarried | Widow | Divorce |
|  |  |  |  |

**Date of Birth :-**

**(as per Matriculation Certificate)**

**Marital Status** :-

**Full Address (Present)**:-

|  |  |  |  |
| --- | --- | --- | --- |
| Village  |  | Tola |  |
| P.O. |  |
| P.S. |  |
| District |  |
| State |  |
| Pin No. |  |
| Mobile No. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Village  |  |
| P.O. |  |
| P.S. |  |
| District |  |
| State |  |
| Pin No. |  |
| Mobile No. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Aadhaar No |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Permanent Address:-**

**Educational & Professional Qualification:-**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Exam. Passed | Name of the Board/University | Marks obtained | % of Marks | Yr. of Passing | Division | Name of the School/College |
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**Nationality** **Caste**

**Religion**- ………………………………….

**Category:** GEN SC S T OBC P.H

**Identification Marks: 1-……………………………………………………………….**

2-…………………………………………………………………………………….

Guardian’s Occupation Monthly income

**HEALTH RECORDS**

**Height**  ...................... **Weight**..............................

**Eye Sight**. : With/without Glass **Blood Group**....................

**Hobbies**: - ....................... ......................... .........................................

**Reason for selecting the Profession** ..............................................................................

Place..................................

Date.................................... ......................................................

 Full Signature of Candidate

For office use only

Receipt No………….. Dated ……………………

Rs. …………………… From ……………………….

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 **ADMIT CARD**

**Roll No. .................... Batch –2024 Session- Oct. – 2024 to Sept. – 2028.**

**Date & time written Entrance Test: -**

**Centre of Examination :- Mahadevi Birla Institute of Nursing &**

**Clinical Technology**

**Course Applied For: - B.Sc. Nursing**

 **(To be filled by the Candidate)**

**Name of the Candidate : ..................................................................**

**Fathers/Husband’s Name : ..................................................................**

**Candidate Signature Issuing Authority Centre Suptd.**