

**UNIVERSITY COLLEGE OF NURSING, FARIDKOT**  
(a constituent College of Baba Farid University of Health Sciences, Faridkot)

**Admission Notice for left over seats of M.Sc. Nursing, Post Basic B.Sc.(N) (Session-2023)**

Applications are invited in the college upto 28.11.2023 before 10.00 am. for admission to left over seats in M.Sc. Nursing, Post Basic B.Sc. Nursing. The counseling will be held on 28.11.2023 at University College of Nursing, Faridkot at 10.00a.m.onwards. The candidates are advised to attend the counseling alongwith original certificates / documents, experience and requisite fee at University College of Nursing, Faridkot. The selected candidates shall pay the Tuition fee on the spot at the counseling venue in the shape of Bank Demand Draft in favor of Registrar, Baba Farid University of Health Sciences, payable at Faridkot. Eligibility as per prospectus for respective course available on University website. Application forms can be obtained by hand from the college office on any working day or can be downloaded from university website [www.bfuhs.ac.in](http://www.bfuhs.ac.in).

Sd-  
Registrar (BFUHS, Faridkot)

**Vacancy position after 4<sup>th</sup> Round of counseling for M.Sc. Nursing, Session 2023**

Sr. No.	College	Specialty	Vacant Seats
01.	University College of Nursing, Faridkot	Community Health Nursing	02 (Gen), 02(SC)

**Vacancy position after 4<sup>th</sup> Round of counseling for Post Basic B.Sc.(N), Session 2023**

Sr. No.	College	Vacant Seats
01.	University College of Nursing, Faridkot	05(Gen), 01(SC), 02(BC)

Sd-  
Principal

**University College of Nursing, Faridkot**  
**APPLICATION FORM for admission to Post Basic B.Sc. Nursing Course, Session-2023**

Entrance Test-23 Roll No. \_\_\_\_\_ Marks \_\_\_\_\_

1. Name (In block letters) : \_\_\_\_\_
2. Father's Name (In block letters): \_\_\_\_\_
3. Date of Birth: \_\_\_\_\_ Age (as on 31.12.2023) \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Day \_\_\_\_\_
4. Category \_\_\_\_\_ Category Code \_\_\_\_\_ As given in prospectus
5. Resident Status Punjab/Other state \_\_\_\_\_ Nationality \_\_\_\_\_

Affix latest  
passport size  
attested  
photograph

6. Address for correspondence (In block letters):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 District \_\_\_\_\_  
 Phone No. \_\_\_\_\_ Mobile \_\_\_\_\_

Permanent Address (In block letters):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 District \_\_\_\_\_  
 Phone No. \_\_\_\_\_ Mobile \_\_\_\_\_

7. Academic qualification :

Exam Passed	Year of passing	Name of School / College	University	Total marks	Marks secured	% age of marks secured
10th						
10+2						
GNM						

8. Registration No. :RN \_\_\_\_\_ RM \_\_\_\_\_ GNM From Punjab/Other State \_\_\_\_\_

9. Professional Experience:

Post	Name of Institution	Date		Total Experience	Remarks
		From	To		

**Signature of the Candidate**

**Enclosures (please attach attested copies of the following documents):**

S.N.	Document	Ticked by candidate	Remarks (for office use)
1	DMC 10 <sup>th</sup> and 10+2		
2	DMC GNM (all years)		
3	Character Certificate		
4	Registration Certificate RN/RM		
5	Domicile/Residence Certificate		
6	Certificate if applying under any reserve category		
7	Experience Certificate		
8	Self undertaking Having not availed any Residence benefit in any other state		

**University College of Nursing, Faridkot**  
**APPLICATION FORM for admission to M.Sc. Nursing Course, Session-2023**

Entrance Test-23 Roll No. \_\_\_\_\_ Marks \_\_\_\_\_

1. Name (In block letters) : \_\_\_\_\_

2. Father's Name (In block letters): \_\_\_\_\_

3. Date of Birth: \_\_\_\_\_ Age (as on 31.12.2023) \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ Days

4. Category \_\_\_\_\_ Category Code \_\_\_\_\_ As given in prospectus

5. Resident Status Punjab/Other state \_\_\_\_\_ Nationality \_\_\_\_\_

Affix latest  
passport size  
attested  
photograph

6. **Address for correspondence (In block letters):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
District \_\_\_\_\_  
Phone No. \_\_\_\_\_ Mobile \_\_\_\_\_

**Permanent Address (In block letters):**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
District \_\_\_\_\_  
Phone No. \_\_\_\_\_ Mobile \_\_\_\_\_

7. Academic qualification (B.Sc. Nursing/Post Basic B.Sc. Nursing) :

Exam Passed	Year of passing	Name of School / College	University	Total marks	Marks secured	% age of marks secured
1 <sup>st</sup> Year						
2 <sup>nd</sup> Year						
3 <sup>rd</sup> Year						
4 <sup>th</sup> year						
Internship (if any)						

8. Registration No. : RN \_\_\_\_\_ RM \_\_\_\_\_

9. Professional Experience:

Post	Name of Institution	Date		Total Experience	Remarks
		From	To		

**Signature of the Candidate**

**Enclosures (please attach attested copies of the following documents):**

S.N.	Document	Ticked by candidate	Remarks (for office use)
1	Matric certificate		
2	Degree Certificate of B.Sc./Post Basic B.Sc. Nursing		
3	DMC of all years (B.Sc./Post Basic B.Sc. Nursing)		
4	Registration Certificate		
5	Domicile/Residence Certificate		
6	Certificate if applying under any reserve category		
7	Experience Certificate		
8	Self undertaking Having not availed any Residence benefit in any other state		

