



232559

KALPATHARU SCHOOL OF NURSING

Belthangady, Mangalore, D.K (District), Karnataka - 574214

Affiliated to KSDNEB, Recognized by Indian Nursing

Council, Karnataka State Nursing Council

Approved by Govt. of Karnataka

Application No .

APPLICATION FORM 2022 - 2023

Affix
PHOTO

Course

GNM ☐Name of the Candidate
(IN Block Letters)

Father's Name

Mother's Name

Permanent Address

Present Address :

Nationality

Pincode

Land Phone

Mobile

E-mail

Whatsap

Sex

☐

Male

☐

Female

Marital Status

☐

Yes

☐

No

Age

Date of Birth

Religious

Caste

Blood Group

Mother Tongue

EDUCATIONAL QUALIFICATIONS

Educational Qualification	Name of the Board	Year of Passing	No. of Attempts	Total Marks Scored	% (Percentage)
SSLC / 10 th					
Plus Two / 12 th					

Attested photocopies of the Certificates to be enclosed along with 10 Recent Passport Size Photographs

Items	Yes/No	Items	Yes/No
1) 10 th Certificate and Marks Sheet		5) Transfer Certificate	
2) Plus Two Certificate and Marks Sheet		6) Conduct Certificate	
3) Migration Certificate		7) Aadhaar Card	
4) Eligibility Certificate		8) Passport Size Photo - 6 nos.	

Local Guardian's Address

.....

Phone : Mobile :

Declaration by the Candidate & Parent: We hereby declare that all the Information provided in the application form above is true to the best of our knowledge and belief.

Signature of the Parent / Guardian

Signature of the Candidate

Date :

Place :

Fees and Other Considerations are to be paid through DD in favor of Kalpatharu School of Nursing payable at Mangalore.

(for Office use only)

Admitted : Yes /No.

Admitted No. :

(Signature of Administrator)

(Signature of the Principal)