



GANGA SHEEL PARAMEDICAL COLLEGE

(City Office : A-3, Rampur Garden, Opp. Gandhi Udyaan, Bareilly) Phone No. 9395064697, 7906895403

Visit us:- www.gangasheelschoolofnursing.com, E-mail: principalgssn@gmail.com

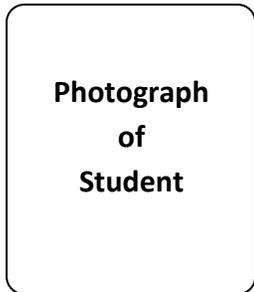
Affiliated by UPSMF, Lucknow (UP)

ADMISSION FORM FOR HOSTEL SESSION 20__-__

GSSN/SN Adm. No .

Instructions for filling the Application Form:

Fill the Application form in **CAPITAL LETTERS**. The form should be complete in all respects. Incomplete forms will not be considered.



1. Course :.....Batch.....
2. Applicant Name :.....Mobile No.....
3. Father's Name :.....Mobile No.....
4. Age :Date of Birth.....Sex.....
5. Address :
6. Aadhar No.....

1. Permanents Address :.....
.....Pin.....

Contact No.:.....Email:.....

2. Correspondence Address :.....
.....Pin.....

Contact No.:.....Email:.....

3. Local Guardian's Address :.....
.....Pin.....

Contact No.:.....Email:.....

Relationship with Student:.....

4. Relationship Profile:

New Recent Photo				
Father	Mother	Brother	Sister	Other

DECLARATION

I will abide by the rules and regulation of the hostel. I shall be solely responsible, for any misconduct/fault done by me. In such case of damage to hostel property, all the charges would be borne by me and my admission may also be cancelled. I will return back all the material; I have received in running condition, at the time of leaving the hostel.

.....
Parent's/Guardian's Signature

.....
Date

.....
Signature of Applicant
Full Name.....
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