



Ref No : AIIMS/BBSR/CON/M.Sc.(N)/40 [4665]

Date : 24<sup>th</sup> July 2023

**REVISED INSTRUCTIONS FOR STUDENTS SEEKING ADMISSION TO  
M.Sc.NURSING (2023 BATCH) AT AIIMS BHUBANESWAR**

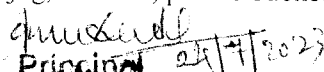
The Director, faculty and staff congratulate all the newly joining students of M.Sc. Nursing 2023 batch for taking admission in All India Medical Sciences (AIIMS), Bhubaneswar. All students are advised to read and follow the following instructions:

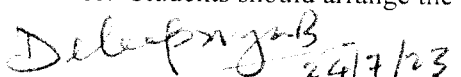
- The students who have allotted AIIMS Bhubaneswar in 1<sup>st</sup> counselling and advised to report from 24.07.2023 to 27.07.2023, to report to College of Nursing, AIIMS Bhubaneswar during the said period.
- The tentative date of commencement of classes will be **01.08.2023**.

**REQUIREMENT OF DOCUMENTS (IN ORIGINAL) DURING ADMISSION**

1. **Laboratory Tests** : Reports of X ray chest (PA view), Random Blood Sugar, Urine Analysis, Blood Group and Rh factor done from a Government/NABL accredited laboratory.
2. **Original Bank Draft worth Rs.2,515/-**(Rupees Two Thousand Five Hundred Fifteen only) in favour of AIIMS Bhubaneswar Academic Fund (A/c No 557810110001482) towards admission fee. (Please write your Name, Mobile No & All India rank at the reverse of the Bank Draft).
3. **Educational Certificates & Other essential documents:-**
  - Mandatory**
    - Offer Letter
    - Seat Allotment Letter
    - Final Registration Slip
    - Admit Card issued by AIIMS
    - 10<sup>th</sup> passing/ Birth Certificate showing her date of birth
    - Degree/provisional/passing certificate of B.Sc.(Hons) Nursing/ B.Sc. Nursing (Post-certificate)/Post Basic/B.Sc. Nursing (4 years) from any recognized University, with 60% marks for Gen/OBC/WES candidates and 55% marks for SC/ST candidates
    - Mark sheet of the qualifying examination.
    - Certificate of Registration as Nurse & Midwife (RN/RM) with any State Nursing Council.
    - Proof of recognition of college from where the candidate has completed B.Sc.(Hons) Nursing/ B.Sc. Nursing (Post certificate)/ Post-Basic/B.Sc. Nursing (4 years)
    - SC/ST/OBC/WES Certificate (if applicable) issued by the competent authority and should be in English or Hindi in language. Community should be clearly mentioned in the certificate. Issue Date - OBC (NCL) 25.06.2022 to 24.06.2023 & WES - 01.04.2023 to 24.06.2023 (both dates inclusive).
    - Disability Certificate (for PWBD candidate). The name, designation and seal of the issuing officer should be legible in the certificate.
    - Self attested copies of all certificates (One set)
    - Three copies of Passport size photographs (Front facing)
  - Desirable**
    - 12<sup>th</sup> Pass certificate and Mark sheet
    - Migration Certificate
    - Transfer Certificate
    - Conduct/Character Certificate
4. Candidate Information Sheet : Appendix A
5. Affidavit for Parent/Guardian : On non judicial stamp paper worth Rs.10/- (Appendix B)
6. Affidavit by the Student : On non judicial stamp paper worth Rs.10/- (Appendix C)

**HOSTEL** : It is mandatory for students to stay in the hostel during the tenure of the course. Students should arrange the items like water jug, tumbler, plastic bucket, Mug, Pillow, Bed sheets & Locks.

  
Principal  
College of Nursing  
AIIMS, Bhubaneswar

  
REGISTRAR  
Signature of the Registrar  
All India Institute of Medical Sciences  
Bhubaneswar-751019



**APPENDIX - A**

**All India Institute of Medical Sciences (AIIMS) Bhubaneswar  
Sijua, Post :Dumuduma, Bhubaneswar (Odisha) – 751 019**

**Web site: [www.aiimsbhubaneswar.edu.in](http://www.aiimsbhubaneswar.edu.in)**

**CANDIDATE INFORMATION SHEET**

**PLEASE FILL UP THE FORM IN CAPITAL LETTER ONLY**

**NAME: (In CAPITAL LETTERS with Prefix SHRI./MS/MRS./DR):**

<b>First Name</b>																								
<b>Middle Name</b>																								
<b>Last Name</b>																								

<b>Date of Birth</b>																								
<b>Gender</b>																								
<b>Religion</b>																								
<b>Caste</b>																								
<b>Category</b>																								
<b>AIR No.</b>																								

<b>Father's Name</b>																								
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<b>Mother's Name</b>																								
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**Address for Correspondence:**

<b>House No.</b>																								
<b>STREET</b>																								
<b>AT / PO</b>																								
<b>Police Station</b>																								
<b>District</b>																								
<b>State</b>																								
<b>Pin code</b>																								

**Permanent Address:**

<b>House No.</b>																								
<b>STREET</b>																								
<b>AT / PO</b>																								
<b>Police Station</b>																								
<b>District</b>																								
<b>State</b>																								
<b>Pin code</b>																								

<b>Aadhaar Card No.</b>																								
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**Telephone Numbers (Mobile / Landline):**

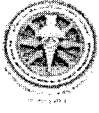
	<b>Mobile</b>											<b>Landline</b>												
<b>Candidate</b>																								
<b>Father</b>																								
<b>Mother</b>																								

**Email ID: (In CAPITAL LETTERS)**

<b>Candidate</b>																								
<b>Father</b>																								
<b>Mother</b>																								

Parent Signature

Student Signature



**AFFIDAVIT (For Parent / Guardian)**

1. I, \_\_\_\_\_ (full name of parent/guardian),  
 father/mother/guardian of, (Student Name) \_\_\_\_\_  
 No. \_\_\_\_\_ having been admitted to \_\_\_\_\_ Regd.  
 \_\_\_\_\_ have received a copy of the UGC  
 Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009 (hereinafter called the Regulations")  
 carefully read and fully understood the provisions contained in the said Regulations.

2. I have in particular perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3. I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and  
 administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively  
 or passively, or being part of a conspiracy to promote ragging.

4. I hereby solemnly aver and undertake that:-

(a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the  
 Regulations.

(b) My ward will not participate in or abet or propagate through any act of commission or omission that may  
 be constituted as ragging under clause 3 of the Regulations.

5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the  
 regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law  
 for the time being in force.

6. I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on  
 account of being found guilty of abetting or being part of a conspiracy to promote, ragging and further affirm that in case the  
 declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_\_\_ day of \_\_\_\_\_ month of \_\_\_\_\_ year.

Signature of deponent  
 Name:  
 Address:  
 Telephone / Mobile No.:

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false  
 and nothing has been concealed or misstated therein.

Verified at (Place) \_\_\_\_\_ on this the (day) of \_\_\_\_\_ (month) \_\_\_\_\_ (year) 20\_\_\_\_\_.

Signature of deponent

Solemnly affirmed and signed in my presence on this the \_\_\_\_\_ (day) of \_\_\_\_\_ (month) 20\_\_\_\_\_ (year)

**OATH COMMISSIONER**

**APPENDIX - C**  
**AFFIDAVIT BY THE STUDENT**  
**(on 10/- Non-Judicial stamp papers)**

I, \_\_\_\_\_

S/O, D/O of Mr. /Mrs. \_\_\_\_\_

Resident of \_\_\_\_\_

1. Do hereby solemnly affirm and declare as under:
2. That I am a citizen of India.
3. That I have completed 17 years of age on \_\_\_\_\_ / will be completing 17 years of age on \_\_\_\_\_.
4. That, I am joining as a student of MBBS/B.Sc(Nursing)/B.Sc(Hons) Paramedical/M.Sc. Nursing at All India Institute of Medical Sciences (AIIMS) Bhubaneswar.
5. That I have gone through the contents and fully understood the AIIMS, Regulations/ Directives for Ragging and Anti-Ragging Measures in accordance with the AIIMS, Bhubaneswar Office Order on curbing the menace of Ragging to be followed by all the students of AIIMS.
6. I hereby solemnly affirm that:
  - I will not indulge or involve myself in any untoward behaviour or act, that may come under the definition of ragging.
  - I will not participate in or abet or propagate ragging in any form.
  - I will not hurt anyone physically or psychologically or cause any other harm to any other student.
7. I have fully understood that, if found indulging or guilty of any aspect of ragging within or outside AIIMS campus. I may be punished as per the provisions of the AIIMS Regulations/ Directives mentioned above and /or as per the law in force for which, I will be solely responsible and shall not claim any compensation.

Deponent

Signature of Parent

VERIFICATION: verified at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20

That the above affidavit is true and correct.

Name:

Address & Contact No.:

Deponent

Signature of Parent