

SJICR/AS/ PBDCTN-ADM/595/2010-11

Date: 17/03/2011

### **ADMISSION NOTIFICATION**

**Applications are invited from eligible Candidates for Post Basic Diploma in Cardio -Thoracic Nursing course conducted by SJICR, B'lore & awarded by KSDNEB, Bangalore.**

<b>Sl. No</b>	<b>Name of the Course</b>	<b>Eligibility</b>	<b>No of seats</b>
1.	Post Basic Diploma in Cardio -Thoracic Nursing	B.Sc (Nursing) or GNM with 1 year experience	10

#### **Instructions:**

1. Prescribed application forms can be obtained from the Academic Section of Sri Jayadeva Institute of Cardiovascular Sciences & Research, B'lore sending a crossed Indian Postal Order or Bank DD of Rs. 500/- as application fee drawn in favour of the Director, SJICR, Bangalore.
2. **Last date for receipt of filled applications is on 26/03/2011.**
3. **Last date for admission is on 31/03/2011.**
4. **Duration of the Course is 12 months with Stipend of Rs. 3000/- per month.**

For further details please contact Academic Section  
Phone No: 080-22977281/261, Fax. No. 080-22977261  
Website: [www.jayadevacardiology.com](http://www.jayadevacardiology.com)

**Sd/-  
DIRECTOR**

**SRI JAYADEVA INSTITUTE OF CARDIOVASCULAR  
SCIENCES & RESEARCH**

(Government of Karnataka-Reg. Autonomous Institute)

Jayanagar 9<sup>th</sup> Block, Bannerghatta Road

Bangalore – 560069. Phone No: 080 – 222977400

Website: [www.jaydevacardiology.com](http://www.jaydevacardiology.com)

**AFFILIATED TO KARNATAKA STATE DIPLOMA NURSING  
EXAMINATION BOARD, KARNATAKA**

Affix Passport  
Size  
Photograph and  
Sign across photo  
below neck level

To,  
The Member – Secretary,  
Selection Committee for Post Basic Diploma  
in Cardio Thoracic Nursing ,  
**Sri Jayadeva Institute of Cardiovascular  
Sciences & Research,**  
Jayanagar 9<sup>th</sup> Block, Bannerghatta Road  
Bangalore – 560069

Admission to Post Basic Diploma in Cardio Thoracic Nursing

(Application to be filled in by the applicant in his/her own handwriting, strike  
out whichever is not applicable)

**1. Name of the Applicant:**  
**(IN BLOCK LETTERS)**

---

**2. Date of Birth:**  
**(Enclose attested copy of**  
**SSLC Marks Card/TC/ extract from the**  
**Cumulative Records Showing Date of Birth**

---

**3. Father / Guardian's Name:**  
**(With address and occupation)**

---

**4. Address of the applicant:**  
**a. Present address:**  
**(Where the interview notice should be sent)**  
  
**b. Permanent address:**

**Contact Number: Res:**

**Mobile:**

**Off:**

---

**5. Gender: Male:**

**Female:**

**5a. Blood Group:**

**Marital Status: Single:**

**Married:**

---

**6. Place of Birth with**  
**Native District and State:**

---

**7. State in which you are domiciled:**

---

**8. Are you a citizen of India by Birth?**  
**If not what is your nationality?**

---

**9. Do you belong to SC/ST**  
**Cat-I, Cat-IIA, IIIA, IIIB and GM:**

---

---

**10. Qualifications:**  
**(Enclose attested copies)**

---

11. Particulars of all examinations & Experience: Eg:- SSLC, PUC, GNM, B.Sc (N) examination passed

Sl. No	Name of the Course	Name of the School/ College	Year of Passing	Percentage of marks obtained	Remarks
1.					
2.					
3.					
4.					
5.					

(If passed in more examinations please attach a separate sheet to mention details and enclosed attested photocopies of the same)

**11. WORK EXPERIENCE:**

Sl.No.	Work Experience including present employment		
	PLACE	DESIGNATION	DURATION
1			
2			
3			
4			
5			

- 12. List of Documents Enclosed:**
- a. SSLC Marks Card**
  - b. PUC or Equivalent Exam marks card**
  - c. GNM/ B.Sc (N) Marks cards**
  - d. GNM/ B.Sc (N) Certificate**
  - e. Experience Certificate**
  - f. Address Proof**
  - g. Caste & income certificate**

**DECLARATION BY THE APPLICANT**

1. I agree to undergo the course on a full time basis and shall not engage myself in any kind of other activities during the period of the course.
2. I hereby declare that I shall abide by the rules and regulations of the institute that are framed from time to time.
3. I hereby declare that information given in this application is true and correct to the best of my knowledge and belief. In case of any information given by me in this application proves to be false or incorrect, I shall forfeit my selection and also face all the legal consequences.

DATE:

PLACE:

SIGNATURE OF THE APPLICANT

---

**DECLARATION BY THE PARENT/GUARDIAN OF THE APPLICANT**

I hereby declare that I am responsible for the timely payment of all fees & dues payable to Sri Jayadeva Institute of Cardiovascular Sciences & Research, Bangalore in respect of my son/daughter ward..... during the period of his/her study at the institute and thereafter until the accounts are cleared. I also declare that the information given above is true and correct.

DATE:

PLACE:

SIGNATURE OF THE PARENT/GUARDIAN