

**Directorate of the Medical Education  
Satpuda Bhawan, Bhopal, Madhya Pradesh**

1073

D.No: /CME/ N /2017

Date: 16/08/2017

**PUBLIC NOTICE**

**Subject :- Check list of essential documents to be submitted with applications for new nursing programs and seat enhancement of existing nursing courses:-**

It is brought to the notice of all concerned that the last date of applications and seat enhancement of existing nursing courses is 30<sup>st</sup> August 2017 .The Check list of essential documents to be compulsorily submitted along with applications is listed below :-

Sr. No	Particulars	Details( The proposal to be indexed as shown below)	Page Number																																			
1	Application/ Covering letter	Details of the course / purpose of Application (New or Seat Enhancement / address along with PIN (Postal Identification Number ) of both institution and society needs to be mentioned in covering letter .																																				
2	State Bank of India Chellan-  चालान का मद :-  " 0210- चिकित्सा एवं लोक स्वास्थ्य - 01 - 'शहरी स्वास्थ्य सेवाएँ - 800 -अन्य प्राप्तियां "  Original/Main Copy of the chellan needs to be attached with Proposal .	<p>Amount for State Bank of India Chellan- (Application on/before 30<sup>st</sup> August 2017)</p> <table border="1"> <thead> <tr> <th>Course</th> <th>Amount for the New program (In Rupees)</th> <th>Amount for the Seat enhancement. (In Rupees)</th> </tr> </thead> <tbody> <tr> <td>GNM</td> <td>10000</td> <td>15000</td> </tr> <tr> <td>B.Sc Nursing</td> <td>25000</td> <td>15000</td> </tr> <tr> <td>Pc.B.Sc Nursing</td> <td>25000</td> <td>15000</td> </tr> <tr> <td>M.Sc Nursing</td> <td>50000</td> <td>15000</td> </tr> </tbody> </table> <p>( For applications between 30<sup>st</sup> August 2017 and 31<sup>st</sup>September 2017)</p> <table border="1"> <thead> <tr> <th>Course</th> <th>Amount for the New program (In Rupees)</th> <th>Amount for the Seat enhancement. (In Rupees)</th> <th>Amount for the Re- Inspection (In Rupees)</th> </tr> </thead> <tbody> <tr> <td>GNM</td> <td>15000</td> <td>15000</td> <td>5000</td> </tr> <tr> <td>B.Sc Nursing</td> <td>37500</td> <td>15000</td> <td>12500</td> </tr> <tr> <td>Pc.B.Sc Nursing</td> <td>37500</td> <td>15000</td> <td>12500</td> </tr> <tr> <td>M.Sc Nursing</td> <td>75000</td> <td>15000</td> <td>37500</td> </tr> </tbody> </table>	Course	Amount for the New program (In Rupees)	Amount for the Seat enhancement. (In Rupees)	GNM	10000	15000	B.Sc Nursing	25000	15000	Pc.B.Sc Nursing	25000	15000	M.Sc Nursing	50000	15000	Course	Amount for the New program (In Rupees)	Amount for the Seat enhancement. (In Rupees)	Amount for the Re- Inspection (In Rupees)	GNM	15000	15000	5000	B.Sc Nursing	37500	15000	12500	Pc.B.Sc Nursing	37500	15000	12500	M.Sc Nursing	75000	15000	37500	
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3	Introduction. Aim , objective and Philosophy		
Documents related to the Society /Trust			
4	Registration certificate of the society	Registration Number, Address, Members and date of registration should be clearly mentioned in the document	
5	Society Byelaw and Constitution	Society byelaw( in which nursing education is the objective of the society, is needs to be highlighted with marker).	
6	Audit report of last three years	Preferably by C.A	
7	Detailed Budget Plan for the applied Academic year		
Documents related to the Institution			
8	Land registry for the Academic and hostel buildings	Documents should clearly , show the name of the owner, Land Parcel Number, Khasra Number)	
9	Blue Print /Map of Institution and hostel buildings		
10	Building completion Certificate for academic and Hostel Building		
11	Requirement list along with availability of furniture and Equipment for the Class room / Academic area		
12	Requirement list along with availability of all the Nursing laboratory and items/Materials/Models/etc.	laboratory wise list of items, Materials and Models	
13	Requirement list along with Library books/Modules/Journals /etc	Subject wise list of the books, Module and Journals	
14	Registry document of the College /School Vehicle  Or  Details for the rent vehicle/ Agreement with institution and vender Memorandum of Understanding with Vehicle vender	Registration Certificate Insurance Driving license of the driver	



Documents related to the Hospital			
15	Parent Hospital Registration Certificate	Registration Number: Name of the Hospital: Owner of the hospital: Date of registration : Number of beds( Specialty wise)	
16	Certificate for the Pollution Control of the Parent Hospital	Specifying the number of Beds in the hospital	
17	Memorandum of understanding /Permission letter from affiliated hospital and Nursing institution	This is only applicable to the institutions in Hilly and tribal areas mentioned in the Government of India's Gazette(Attach the concerned gazette /Notification)	
18	Affiliated Hospital Registration Certificate	Registration Number: Name of the Hospital: Owner of the hospital: Date of registration : Number of beds( Specialty wise)	
19	Certificate for the Pollution Control of the Affiliated Hospital	Only enclose the document , if the point number 17 is applicable to the proposal	
20	Permission letter from affiliated hospital/concerned authorities for the training in the specializations like Psychiatry , Cardiology , CHC , PHC etc as per Indian Nursing Council norms		
Document related to Human resources			
21	Requirement list along with availability of the teaching faculties	<ul style="list-style-type: none"> <li>- Qualification certificates along with registration certificate.</li> <li>- Non objection certificate / Relieving letter from previous institute</li> <li>- Appointment order.</li> </ul> These documents needed for all the faculties	
22	Requirement list along with availability of the non-teaching faculties	<ul style="list-style-type: none"> <li>- Qualification certificates</li> <li>- Appointment order.</li> <li>- Non objection certificate / Relieving letter from previous institute</li> </ul> These documents needed for all the non- teaching faculties	
Academic Plan			
23	Admission committee and its Policies		

Only for Seat enhancement			
24	Previous affiliation documents	<ul style="list-style-type: none"> <li>- State government Desirability and Feasibility</li> <li>- Indian Nursing Council affiliation letter</li> <li>- Madhya Pradesh State Nurses Registration Council affiliation letter</li> <li>- University affiliation letter</li> </ul>	
25	Affiliated Institution list by INC for the Current academic year , in which the institute name is present		

**Note –**

- Documents in the proposals should be readable and properly arranged with page number. All the document needs to be valid for he current academic year (Ex: Certificate for the Pollution Control and vehicle registration etc ) . All the documents need to be self attested by Principal/Head of the society /institution.
- Two copies of proposal needs to be submitted for Inspection and related formalities.



Director Medical Education  
Madhya Pradesh