



TMM COLLEGE OF NURSING

The Dewan Bahadur Dr. V. Verghese Hospital Trust Association
Anjilithanam P. O, Kaviyoor, Thiruvalla, Kerala, India - 689582
0469 2618653, 2619041 | www.tmmnursingcollege.in

BIODATA FORM

To be filled by each student securing admission at TMM College through
NRI/PNCMAK/LBS to the B.Sc. Nursing Course for the Academic year 20__ – 20__

Admitted Under (Tick Applicable): PNCMAK PNCMAK - NRI LBS

PNCMAK / LBS Allotment Number:

All Date should be in CAPITAL

1	First Name of the Candidate (Initials to be expanded)	
2	Middle Name (Initials to be expanded)	
3	Last Name (Initials to be expanded)	
2	Date of Birth and Age in years (D/M/Y/yrs)	<input type="text"/>
3	Sex (M/F)	
4	Caste and Religion	
5	Encircle the category you belong to	SC / ST / OBC (H) / OEC / Fisheries/ General
6	Aadhar Card Number	
7	Name and passport No. of the sponsor – if applied under NRI Quota	
8	Educational Qualification/s (12 th or with any other higher degree)	
9	Migration Certificate Number	
10	Name of the School of 10 th Standard	
11	10 th Certificate Number,	
12	10 th Certificate Issuing Date	
13	Indicate the place of 12 th standard education	



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14	12 th Standard Board of Study (HSE/CBSE/ICSE, If Others, mention name)	
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15. Subject	11 th (Plus One)		12 th (Plus Two)		Total Marks Obtained (A+B)	Percentage $[(A+B)/(C+D)] * 100$
	Marks Obtained (A)	Max Marks (C)	Marks Obtained (B)	Max Marks (D)		
Physics						
Chemistry						
Biology						
English						
Total						

16	12 th Exams written using Scribe (Tick applicable)	Yes	No		
17	If the above is YES, Submitted the required documents	Yes	No		
18	Name of Father		Occupation		Mob
19	Name of Mother		Occupation		Mob
20	Name of Guardian		Occupation		Mob
21	Name of Sponsor (If NRI)		Occupation		Mob
22	Permanent Address with PIN & Tel. No. with STD code				
23	Present Address with PIN & Tel. No. with STD code, Mobile No.				



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Declaration by the Applicant

I, hereby declare that I have carefully gone through the prospectus (online on college website) and I promise to abide by the rules and regulations. I declare that I have no physical or mental disabilities that disqualify me for admission. I further declare that I have written the 12th exams in regular manner and without the assistance of a scribe.

I declare that the statement made by me in this application and the documents produced in support thereof are true to the best of my knowledge and belief.

Place:

Signature:

Date: / / 20__

Name:

Declaration by the Parent / Guardian

I, have carefully gone through the prospectus (online on college website). I undertake to pay regularly all the fees till the completion of the course and to execute an agreement with the management accordingly. I further declare that my ward is of sound health and mind and has written the 12th exams in regular manner and without the assistance of a scribe.

Place:

Signature:

Date: / / 20__

Name:

Note:

1. Application form should be filled in by the candidate in his / her own handwriting. Self-attested copies of certificates / documents should be attached along with this Bio Data.
2. Original certificates must be produced at the time of interview / Admission.

FOR OFFICE USE ONLY (TMM College of Nursing)

If Any Remarks

Name

Signature

Date