GOVERNMENT COLLEGE OF NURSING NANDURBAR

Information Brochure for Admission to B.Sc.Nursing Course.
A.Y. 2026-2027

Contact Number :- 02564-210444
Mob.No. 9665000348,7741032399, 8390519755.

(Contact between 10 : 00 to 5 : 30 PM only)
Students And Parents Are Requested to Call Only on Above Number Regarding Any Information.

NOTIFICATION

(For B.Sc. Nursing CET UG-2026 Admission)

All the selected students of CET-UG-2026-27 Allotted Seat at B.Sc. Nursing, Government College of Nursing, Nandurbar should following instructions and accordingly report with all details required for admission process.

1. **Download & Print this PDF File. Read all Details Carefully.**
2. Print and fill 02 Copies of Application form, & Candidate Information.
3. Bring 06 passport size colour Photographs.
4. Bring Medical Fitness Certificate in the prescribed format ONLY. (Annexure -H)
5. All Original Documents enlisted in the Checklist with two sets of Self Attested photocopies of all original documents.
6. Soft copies of all original documents (INDIVIDUALLY SCANNED IN PDF FORMAT ONLY) are compulsory required during admission (arrange as per given checklist)
7. Student one pen drive- In Pen Drive Scan All Original Documents INDIVIDUAL SCAN IMN PDF **Format only.** Student should scan document properly through computer scanner **(Size 500 kb)**. Add Soft copy of Student Latest Photo in Pen Drive.
   Don't use mobile scanner for scanning documents.

   Each Original Documents should be scanned and **renamed** appropriately.

   E.g. Nationality Certificate, after scanning should be renamed as

   Nationality - Hitesh Rajput (Name of Student)

   Create a Folder in Pen Drive and Rename it with Name of the student. Keep all scanned documents in this folder.
8. Students to note that the demand Draft (D.D) of desired fees should not have any error/spelling mistakes in the name of D.D. desired. Such DD will not be accepted. **Cash/Cheque will not be accepted. (Annexure-1)**

#Candidates should write their Name and phone number on the backside of each D.D.

9. **Kindly Note : Admission Process requires verification and approval. No student will be given joining letters urgently. The office may require 2-3 days to complete the process.**

   Students are advised to read details of admission processing information.

   Brochure/FAQs, other notifications available on CET Cell official website

   The institute is responsible only for admissions; students are advised to check official websites for any queries.
10. Students are strictly advised **NOT TO EDIT MODIFY ANY FORMATS**. All formats should be filled by student in his/her own handwriting.
11. Candidate should report between 10.00 am to 05.00 pm. Submit all documents in a button folder plastic file.
12. **Submit all documents in a button folder Plastic file.**

Check List

(For Original Certificates & 02 Photocopies)

- **Mandatory Documents :-**

1. Provisional Selection Letter (B.Sc. Nursing 2026-27)
2. Copy of B.Sc. Nursing Application Form 2026-27.
3. Admit Card (B.Sc. Nursing 2026-27.
4. B.Sc. Nursing Result 2026-27 Score Card/Marksheet.
5. S.S.C. Passing Certificate (for equivalent for Date Birth)
6. S.S.C. Marks sheet.
7. H.S.C. Marks sheet.
8. Physical/Medical Fitness Certificate (inprescribed Format)
9. Nationality Certificate & Domicile Certificate
10. Transfer Certificate/ Leaving Certificate (if applicable)
11. Identity Card Xerox (Aadhar Card)
12. Election Voting Card Xerox (if applicable)

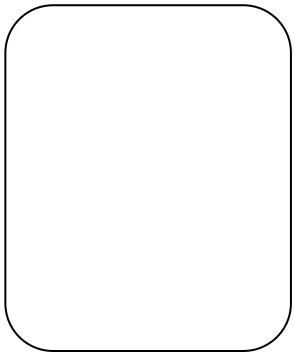
- **If Applicable (for Format please refer annexure attached)**

1. Caste Certificate.
2. Caste Validity Certificate.
3. Non Creamy-Layer Certificate Valid Up to- 31.03-2027 (NT-1, NT-2, NT-3, OBC, Including SBC & SEBC)
4. Migration Certificate
5. Gap Certificate (Stamp paper affidavit)
6. Person with Disability (PWD)
7. Hilly Area Certificate (Parent Domicile Certificate, Class 10^{th} or 12^{th} from Candidate Certificate)
8. Ex- Servicemen Certificate of Defence Person.
9. Domicile Maharashtra Certificate of Defence Person.
10. MKB Dispute area Certificate Mother tongue certificate.
11. Eligibility Certificate for EWS for year 2026-27.
12. Orphan Certificate.
13. In-Service Candidate for Necessary Documents.
14. All required Certificates mentioning the Claimed dreservations by candidates.
15. All Original certificate need to scan in pen drive.

(Single PDF file of each document separately less than 500 kb size And Passport photo & Sign. Max size less than 03 Mb each)

Simple Button Folder File

APPLICATION FORM (To be filled by candidate)

Rank No.:- ..... **Marks :-** **DOB :-** **Category :-.....** **Admitted Category :- .....**	**Name of Candidate :-** **(As per 12th Marksheet)** **Kum:-.....** **.....** **Address :-** **.....** **.....** **.....** **.....** **Student Mobile No. :-.....** **Father Mobile No :-.....** **Mother Mobile No :-.....** **Date :- .....**
	

To,
The Principal,
Government College of Nursing,
Nandurbar.

Sub :- Joining in B.Sc. Nursing Course at Govt. College of Nursing, Nandurbar (M.H.) Academic Year 2026-2027.

Ref :- Selection Letter /List : (Printout attached).

Respected Sir,

I the undersigned Shri./Kum. (Full Name in Capital) _____

Has been selected for B.Sc. Nursing Course at Government College of Nursing, Nandurbar as per the selection letter of State List.

Kindly enroll me in your college as Ist B.Sc. Nursing student for Academic Year 2026-27.

Thanking You.

Yours faithfully,

Signature of Candidate

(Name :_____)

GOVERNMENT COLLEGE OF NURSING, NANDURBAR
B.SC. NURSING ADMISSION FOR THE YEAR 2026-27.
STUDENT INFORMATION

01	Name of the Student as mentioned on HSC Mark sheet (in Capital)	
	Guardian/ Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devnagri (Marathi/Hindi)	
02	Residential Address with PIN Code	
	Mobile No. Of Student	
	Mobile No. Of Student	
03	E-mail Address of Student	
	E-mail Address of Parent	
04	a) Date of Birth	
	b) Place of Birth	
05	Aadhaar No.	
06	Gender (Male/Female)	
07	Marital Status (Married / Unmarried)	
08	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
09	Non Creamy layer Certificate Valid up to March 2027	Yes/No/Not Applicable
10	Domicile State (belongs to which state)	
11	Allotment Date	
12	Admission Date at College	
13	Academic Record	
	S.S.C. Year of Passing :-	
	Name of the HSC/12th Board	
	Marks Obtained in H.S.C. (10+2)	
	(E) English : Marks Obtained	/100
	(P) Physics : Marks Obtained	/100
	(C) Chemistry : Marks Obtained	/100
	(B) Biology : Marks Obtained	/100
	Total Marks (phys+Chem+Bio)	/300 (P+C+B)

	CET-UG-2026 Roll No.	
	CET-UG-2026 Marks	/100
	CET-UG-2026 Rank No.	
	Name of Board in HSC Exam	
14	Blood Group	
	Mark of Identification (two)	1)
		2)
15	Guardian /Father's Occupation	
16	*Willingness about organ donation after Accidental Death.	Yes / No

* As per Maharashtra University of Health Sciences eligibility form.

Date :- / /2026

Place:- Nandurbar

Signature of Candidate

महाराष्ट्र शासन

शासकीय परिचर्या महाविद्यालय,

जननायक बिरसा मुंडा,शासकीय वैद्यकीय महाविद्यालय व रुग्णालय, नंदुरबार

जिल्हा सामान्य रुग्णालय परिसर, दुधाळे शिवार, साक्री रोड, नंदुरबार-425412.

GOVERNMENT COLLEGE OF NURSING,

Jan Nayak Birsa Munda Government Medical College & Hospital,

District Civil Hospital Campus, Dudhale Shivar, Sakri Road, Nandurbar-425412

Website –htpp://gmcnandurbar.com, PhoneNo.(02564) - 210444, E-mail:- congmchnandurbar@gmail.com

जा.क्र.शापमनं/विवि/प्रवेश प्रक्रिया/ /२०२६ दिनांक- / /२०२६

HOLDING CERTIFICATE

This is to certify that Shri/Kum._____is admitted in this college on / /2026 to I[st] B.Sc. Nursing course for the Academic year 2026-27. His/her following **ORIGINAL CERTIFICATES** are retained in this College.

Sr.No.	Original Documents List of Student Certificates submitted (Original Set + 2 Sets of Xerox copies duly self-attested)	Yes / No
01.	Photo Identy proof. (Adhaar Card)	
02.	Voter Id or Annexxure - C	
03.	Nationality and Domicile Certificate	
04.	SSC/10th Passing Certificate (Date of Birth proof)	
05.	SSC/10th Marksheet	
06.	HSC/12th Marksheet	
07.	MH-Nursing CET 2026 Online Application Form	
08.	MH-Nursing CET 2026 Admit Card	
09.	MH-Nursing CET 2026 Score Card	
10.	Provisional allotment letter generated online (for AI students)For state quota candidates,Allotment letter /Selection list page printout bearing name of candid	
11.	Caste Certificate	
12.	Caste Validity Certificate	
13.	Non-creamy layer Certificate. (Valid up to 31/03/2027)	
14.	College Leaving Certificate (LC/TC)	
15.	Medical Fitness Certificate (as per prescribed format)	
16.	Migration Certificate. For outside Maharashtra State (OMS) candidate only	
17.	Education Gap Certificate	
18.	Defence Certificate (Certificate from District Sainik Board Domicile Certificate of Parent (D-1,D-2) Transfer Order of Parent for D-3	
19.	Physically Handicapped Certificate. (if applicable)	
20.	Economically Weaker Section (EWS Certificate Valid for 2026-27)	
21.	Orphan Certificate (as per MH Nursing CET 2026 page no. 96 prescribed format)	
22.	Hilly Area Certificate & Parents domicile (if applicable Essential Documents)	
23.	Undertaking Form/ Joint Unerdaking	
24.	Income Certificate	
25.	Other..	
Tuition Fees Demand Draft :- D.D. No :- of Rs. Date :- / /2026		
Other fees :- D.D. No. Rs. Date :- / /2026 Bank Name :-		
(Document Sets to be Prepared exactly as per above sequence) (Please write down Yes/No Carefully)		

Verifying Officer **Scrutiny Officer** **Principal,**
Government College of Nursing,Nandurbar

B.Sc. Nursing Government College of Nursing, Nandurbar
Fee Structure of B.Sc. Nursing Admission For Academic Year 2026-27.

A)

Fees	(For Open Category Student & Other than Maharashtra Student	For Reserve Category (ST/SC/EWS Female/SEBC Female & OBC/ VJNT Students whose Income less than 8 Lac)	(For EWS/ SEBC Male Students)
Tuition Fee	**Rs. 25,400/-** (For Open Category Students)	**NA** (Tuition fee is exempt to reserve Category student those eligible for scholarship)	**Rs. 12,700/-** (50 % Tuition fee is exempt to EWS student those eligible for EBC)
D.D. (Rs.25,400/-, Rs. 12,700/-) in Favour of - Dean, Government Medical College, Nandurbar			

For All Students

B)

Admission Fee (One time)	Rs.1500/-	Rs.1500/	Rs.1500/-
Library Deposit	Rs.2000/-	Rs.2000/-	Rs.2000/-
Library Fee (Annual)	Rs.1000/-	Rs.1000/-	Rs.1000/-
Gymkhana Fee (Annual)	Rs. 500/-	Rs. 500/-	Rs. 500/-
Total	**Rs.5000/-**	**Rs.5000/-**	**Rs.5000/-**
D.D. (Rs.5,000/-) in Favour of - Dean, Government Medical College, Nandurbar			

Note :-

1. Please note Cash/Cheque will not be accepted.
2. No errors or spelling mistakes in the D.D. will be accepted.
3. D.D. Only from **Nationalised Bank** (such as SBI, Axis, HDFC, ICICI, Canara, BOB, BOI etc will be Accepted.
4. The demand draft will be deposited in the college accounts only after cut-off date of admission process.

* If Student are allotted another college in subsequent rounds of All India / State in such situation Demand Draft will be refunded back to the student.

* All such student will be required to pay an amount of **Rs. 1500/- as cash** (Admission can Cancellation) in the Cash Section of accounts Department.

Write down Student Name & Mobile Number on back side each D.D.

Sd/-
Principal,
Government College of Nursing,
Nandurbar

.....

.....

.....

Date : / /2026

To,
The Principal,
Government College of Nursing,
Nandurbar- 425412

Subject :- Regarding Non-Submission of Original Certificates.

Respected Sir,

I am selected for admission to B.Sc. Nursing Course in the Year 2026-2027 at Government College of Nursing, Nandurbar

I have not brought the following original certificates :-

1) _____

2) _____

3) _____

4) _____

I hereby assure to submit the above mentioned certificates within a period of 15 days from the date of admission otherwise, my admission for B.Sc. Nursing course will be cancelled. Therefore, kindly admit me provisionally and oblige.

Thanking you.

Your sincerely,

Place :- Nandurbar.

Dated :- / /2026 ( )

JOINT UNDERTAKING

(For All Newly Admitted Students)

Name of the Student : _____

Roll No. : _____

Government College of Nursing, Nandurbar (M.S)

We have read Maharashtra Provision of **Anti Ragging act 1999 (Maharashtra XXI III of 1999)** and relevant instructions against ragging. We are well aware of punishment under this act.

If my son/ daughter/ myself have been found guilty, he shall be punished for appropriate action under the act including imprisonment for a term which may extend to two years with **fine upto Rs. 10,000/-** (In words Rs. Ten thousand only) or dismissal from the institute and suspension of student for various periods during inquiry period.

I am also aware of the fact that it will be mandatory for the institute to file First Information Report (FIR) to Local Police Authorities in case Victim of ragging or his/ her parents / Guardian is not satisfied with the action taken by the Head of the institution or where head of the institution is of the opinion that the incident ought to be reported.

Place : Nandurbar

Name & Signature of Student

Date : _____

Name & Signature of Parent

Signature of
Member Secretary
Anti Ragging Committee

Signature of
Principal,
Government College of Nursing,
Nandurbar

Note :- Student shall submit this undertaking on Rs. 100/- stamp paper at the Earliest

Applicant's Photo

Educational Gap Certificate

I ..... Son / Daughter of .....aged.....occupation.....resident ....with UID No. ..... Hereby declar that, I have passed.....course from ..... College during the year ..... and I hereby state that, I have not taken admission during the period of gap from ..... to ..... period, hence, the gap arises in my education.

The information provided above is true and correct to the best of my personal knowledge, information and belief. I fully understand the consequences of giving false information. If the information is found to be false, I shall be liable for prosecution and punishment under Indian Penal Code and / or any other law applicable thereto.

Place :..... Applicant's Signature.....

Date :..... Applicant's Name :.....

ANNEXURE "H"

MEDICAL FITNESS

A candidate must be medically fit to undergo the professional course applied for. The medical fitness must be certified by a Registered Medical Practitioner in the prescribed proforma, as given below on a **Letterhead** or on this format with original seal and signature.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted clinical examination of Mr./Ms. ……. ……. who is desirous of admission to Health Science Courses.

He/she has not given any personal history of any disease incapacitating him/her to undergo the professional course. Also, on clinical examination it has been found that he/she is medically fit to undergo the professional course.

Certified that he/she fulfills the following criteria.

(1) Absence of any incapacitating and /or progressive systemic disease/disorder/condition,
(2) Absence of any disability of upper limb/s.
(3) Absence of any major visual/ auditory disability.
(4) Absence of psychosis/neurosis/mental retardation,
(5) Ability to maintain erect posture,
(6) Reasonable manual dexterity.

Though, following deviations have been revealed, in my opinion, these are not impediments to pursue a career as a Medical / Dental / Ayurved / Homeopathy / Unani / Occupational Therapy / Physiotherapy / Audiology & Speech, Language Pathology / Prosthetics & Orthotics / BSc Nursing. **(Strike, which is not applicable):**

1. .....

2. .....

3. .....

Address of the Registered Medical Practitioner	Signature
	Name
	Registration No.
Date:	Seal of Registered Medical Practitioner

SCRUTINY FORM

Government of Maharashtra

COMMISSIONERATE, COMMON ENTRANCE TEST CELL, MUMBAI

MH-Nursing CET 2026 – To be filled at the time of admission

SCRUTINY FORM

PROVISIONAL STATE MERIT NO.:

Scrutiny Center: _____

Candidate's Name: _____

MH-Nursing CET Roll No.: _____ **MH-Nursing CET MERIT NO.:** _____

MH-Nursing CET MARKS PERCENTILE: _____ **Category:** _____

HSC PCB: _____/_____ **HSC E:** _____/100

Mobile No. _____ **Ear-Marking only of reserved candidates** ☐ **Open** ☐ **Reserved**

Signature of Candidate

(Arrange a set of original certificates and one set of attested photocopies separately in the order given below for verification)

Remarks: **(For Office Use only)**

Eligible: Yes / No

If not eligible, reason/s _____

_____

Any other remarks: _____

_____

_____

Name & Signature of Scrutiny Officer

- ☐ Admit card of MH-B.Sc Nursing-CET 2026
- ☐ Copy of Online application Form (Latest)
- ☐ MH-B.Sc Nursing-CET 2026 Mark sheet
- ☐ Nationality certificate/valid Indian passport
- ☐ Domicile Certificate
- ☐ H.S.C. (or equivalent) examination marksheet
- ☐ SSC (or equivalent) passing certificate (for Date of Birth)
- ☐ Medical fitness certificate (Annexure - H)

If applicable

- ☐ Caste Certificate
- ☐ Caste Validity Certificate
- ☐ Non Creamy layer Certificate valid upto 31/03/2027 (VJ, NT1, NT2, NT3, SEBC, OBC including SBC)

Specified Reservation

- ☐ D1/D2/D3 : Ex-servicemen Certificate, actual service certificate
- ☐ D1/D2 : Domicile Certificate of Defence person
- ☐ D3 : Transfer certificate
- ☐ Person with disability Certificate (PWD)
- ☐ EWS Eligibility Certificate
- ☐ Orphan Certificate

Signature with date of Clerk

Annexure 'C'

पदवी, पदव्युत्तर पदवी प्रथम वर्ष अभ्यासक्रमास प्रवेश घेणाऱ्या सर्व मुला/मुलींकडून

प्रवेशाच्या वेळीस मतदार यादीमध्ये नाव नोंदणी करण्याच्या अनुषंगाने घ्यावयाचे प्रमाणपत्र / हमीपत्र नमुना.

मी....., अभ्यासक्रम.....

..... महाविद्यालयाचे नाव : .....

..... या महाविद्यालयात प्रथम वर्षात प्रवेश घेतला असुन मी दिनांक: ०१/०१/.....

रोजी १८ वर्षाचा / वर्षाची झालो / झाली आहे किंवा होणार आहे. १८ वर्ष पूर्ण झाल्याबरोबर मी माझे नाव

मतदार यादीत नोंदवून घेणार आहे अशी मी प्रतिज्ञा करतो / करते.

स्वाक्षरी :.....

नाव : .....