



भारत सरकार/ GOVERNMENT OF INDIA



अटल बिहारी वाजपेयी आयुर्विज्ञान संस्थान एवं डॉ नई दिल्ली ,राम मनोहर लोहिया अस्पताल .  
ATAL BIHARI VAJPAYEE INSTITUTE OF MEDICAL SCIENCES,  
DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

No. 10-07/2024-RMLH/CON

dt: 13/08/2024

To

The Chairman E-Governance  
Dr. R.M.L Hospital  
New Delhi

**Sub: Uploading of information regarding student's joining in College of Nursing,  
Batch 204-2024.**

Sir,

Please find enclosed herewith the information regarding joining of students in College of Nursing for Academic Year 2024-2025. Kindly upload this information at College of Nursing of our institute website.

Please do the needful.

Thanking You,

Yours faithfully,

Dr. Nirmala Singh  
Principal  
College of Nursing  
Dr. R.M.L Hospital  
New Delhi



सत्यमेव जयते

भारत सरकार/ GOVERNMENT OF INDIA

अटल बिहारी वाजपेयी आयुर्विज्ञान संस्थान एवं डॉ नई दिल्ली , राम मनोहर लोहिया अस्पताल .

**ATAL BIHARI VAJPAYEE INSTITUTE OF MEDICAL SCIENCES,  
DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI  
College of Nursing**



**INSTRUCTION REGARDING- ADMISSION 2024-2025 BATCH**

A. Candidates have to report for admission at **10 A.M to 12:30 P.M. After 12:30 P.M** Candidates will not be Entertained ( **Monday to Friday except public holiday i.e. Sunday 26<sup>th</sup> August (Janmashtami) , 16<sup>th</sup> September (Id-e-Milad) , 2<sup>nd</sup> October (Mahatma Gandhi's Birthday) , 12<sup>th</sup> October (Dussehra), 31<sup>st</sup> October (Diwali), 15 November (Guru Nanak Birthday) being Gazetted holiday's**).

- The candidate and their documents will be physically verified by the institute at the time of admission and if any discrepancy is found the seat allotted and the admission will be cancelled.
- The candidate should also submit their willingness for participation in further rounds of counseling.
- candidate are advised to visit **MCC, GGSIP University and Institute website ,RML Websit ( [www.rmlh.nic.in](http://www.rmlh.nic.in) )** regularly for updates regarding the counseling.
- All Candidates who have secured admission into B.Sc(H) Nursing and who have been allotted, **College of Nursing, ABVIMS & Dr. R.M.L Hospital by MCC , DGHS** have to bring following original documents along with 3 sets of self-attested photocopies for the purpose of admission. These original documents will be physically verified by the Institute. **List of required documents compulsory at the time of reporting at College of Nursing, ABVIMS & Dr. R.M.L Hospital for the purpose of B.Sc(H) Nursing admission via NEET Counseling.**

1. Provisional Allotment letter by MCC.
2. Rank Letter and Result(Both)
3. NEET Admit Card
4. Class 10<sup>th</sup> Certificate
5. Class 10<sup>th</sup> Mark Sheet
6. Class 12<sup>th</sup> Certificate
7. Class 12<sup>th</sup> Mark Sheet
8. Six (6) Passport size photographs.
9. Two (2)family Photographs Including all the members of the family
10. Conduct and character certificate from head of the institution from where last qualifying examination was passed
11. Medical certificate as per enclosed format from Govt. Hospital/Dispensary.(**PDF Attached No.1**)
12. Identity Proof (Adhar card , voter Card )
13. Latest Certificate from competent authority on prescribed form if belonging to reserve category SC/ST/OBC/EWS/PWD.

14. Migration Certificate/transfer Certificate.
15. **Notarised** Affidavit by Parents/Guardian and students (Anti-Ragging). –  
**(PDF attached No.2 & 3)**
16. Gap Affidavit (if applicable).**(PDF Attached No.4)**
17. Guardianship letter duly signed by parents (If applicable) admission will not be considered, if the duly signed letter not received.**(PDF attached No.5)**
18. PWD certificate (Physically Challenged certificate for physically challenged candidates, as per guidelines, if applicable).
19. Bring Three (03) photocopy sets of all the above documents at the time of admission.
20. Two plastic folders to keep all the documents arranged in **Sl. no. 1 to 19**.

**B. Fee Deposit Guidelines:-**

- The Fees have to be submitted to the college at the time of admission.
- The amount of Rs. 41,125/- (Rupees Forty one thousand one hundred twenty five only) can be deposit in favour of **College of Nursing, A/C. No. 26020200000342 & IFSC Code BARBORAMDEL** (Fifth Digit is Zero) and receipt will be submitted in Institution at the time of admission (the fees amount can be increased as per **GGSIU University** guidelines time to time).

**C. Hostel Accommodation:-**

- Hostel is not compulsory. Hostel will be provided only to those students who are staying beyond 40 Km of **College of Nursing if there are vacant room**.



PDF ①

~~XXXXXXXXXX~~

**Guru Gobind Singh Indraprastha University**  
Sector 16 C, Dwarka, New Delhi-110078

Photograph duly  
attested by the  
officer who has  
certified this  
certificate

**MEDICAL CERTIFICATE \*\***  
**(FOR THE ACADEMIC SESSION 2023-2024)**  
**(TO BE SUBMITTED AT THE TIME OF COUNSELLING /ADMISSION)**

I certify that I have carefully examined Shri /Km/Smt.\* \_\_\_\_\_  
son/daughter/Wife of Shri/ Smt.\* \_\_\_\_\_ whose  
signature is given below. Based on the examination, I certify that he/she is in good mental and physical  
health and is free from any physical defects which may interfere with his/her studies including the active  
outdoor duties required of a professional. Visible Mark of Identification

Signature of the Candidate \_\_\_\_\_

Place :

Date :

**Name & Signature of the  
Medical Officer with Seal and  
Registration Number**

\*Strike whichever is not applicable.

\*\* To be signed by a Registered Medical Practitioner holding a Medical degree.

Note : Use photocopy of this Form

ADMISSION BROCHURE ~~XXXXXXXXXX~~



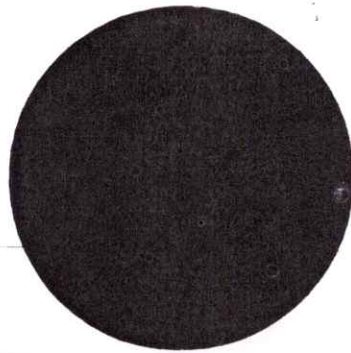
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INDIA NON JUDICIAL

Government of National Capital Territory of Delhi

e-Stamp

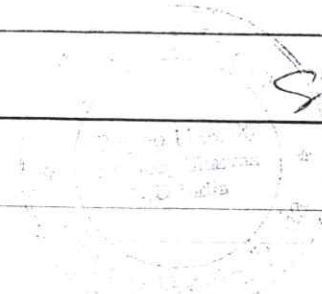
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 Certificate Issued Date : 15-Sep-2023 01:13 PM  
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 Unique Doc. Reference : SUBIN-DL102700300910649183434V  
 Purchased by : ~~XXXXXXXXXX~~  
 Description of Document : Article 4 Affidavit  
 Property Description : Not Applicable  
 Consideration Price (Rs.) : 0  
 (Zero)  
 First Party : ~~XXXXXXXXXX~~  
 Second Party : Not Applicable  
 Stamp Duty Paid By : ~~XXXXXXXXXX~~  
 Stamp Duty Amount(Rs.) : 10  
 (Ten only)



Please write or type below this line

**DOCUMENT ATTACHED**

~~XXXXXXXXXX~~  
**SANDEEP SHARMA**  
Advocate  
**DELHI HIGH COURT**



17/3/2023

Register Entry No. \_\_\_\_\_

SEP 2023

**UNDERTAKING BY THE STUDENT WITH RESPECT TO ANTI RAGGING**

I, [REDACTED] Admission/Registration/Enroment No. \_\_\_\_\_ Daughter of [REDACTED] having been admitted to Programme/Stream **B.Sc Nursing** at **ABVIMS & Dr. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI-110001** (name of the institution), 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 5 and clause 6.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case. I am 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) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) I 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, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6). I hereby declare that I have 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, I am aware that my admission is liable to be cancelled.

Declared this **15<sup>th</sup> day of September 2023**.

[REDACTED]

Signature of deponent

Name: [REDACTED]

Address: [REDACTED]

Mobile No. [REDACTED]

**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 Delhi **15<sup>th</sup> day of September 2023**.

[REDACTED]

Signature of deponent

Solemnly affirmed and signed in my presence on this **15<sup>th</sup> day of September 2023** after reading the contents of this affidavit.



**ATTESTED**  
NOTARY PUBLIC  
Delhi (INDIA)

**SANDEEP SHARM**  
Advoc  
**DELHI HIGH COURT**

Register Entry No. **1713/2023**

**15 SEP 2023**

**15 SEP 2023**

**UNDERTAKING BY THE PARENT WITH RESPECT TO ANTI RAGGING**

I. [Redacted] Father of [Redacted] Admission/Registration/Enroment No. [Redacted] having been admitted to Programme/Stream **B.Sc Nursing.** at **ABVIMS & Dr. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI-110001** (name of the institution), 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 5 and clause 6.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case. 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 me 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 quality of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this **15<sup>th</sup> day of September 2023.**

[Redacted Signature]  
Signature of Deponent:

Name: [Redacted]

Address: [Redacted]

Mobile No [Redacted]

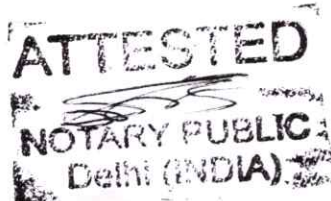
**VERIFICATION**

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 of misstated therein.

Verified at Delhi **15<sup>th</sup> day of September 2023.**

[Redacted Signature]  
Signature of deponent

Solemnly affirmed and signed in my presence on this **15<sup>th</sup> day of September 2023** after reading the contents of this affidavit.



**15 SEP 2023**

Register Entry No **1714/2023**

**15 SEP 2023**

**AFFIDAVIT FOR GAP**

I, [REDACTED] Daughter of [REDACTED], Resident of : [REDACTED], do hereby solemnly affirm and declare as under:-

1. That during the Gap period from [REDACTED] upto **till date**, I did not join any College/University/Institution, as I was preparing myself for **UG Entrance Exam** during the above Gap period, I was not involved in any criminal activity and also that I was not working during the above gap period anywhere.
2. That statement is true and correct.

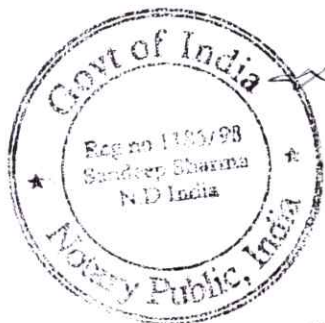
[REDACTED]  
DEPONENT

Verification:

Verified at **New Delhi** on this **15<sup>th</sup> day of September 2023** that the contents of this affidavit are true and correct to the best of knowledge and nothing has been concealed there from.

[REDACTED]  
DEPONENT

**ATTESTED**  
[Signature]  
**NOTARY PUBLIC**  
Delhi (INDIA)



**15 SEP 2023**

**SANDEEP SHARMA**  
Advocate  
**DELHI HIGH COURT**

Register Entry No. 17.15/2023

**15 SEP 2023**





pdf 5.



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अटल बिहारी वाजपेयी आयुर्विज्ञान संस्थान एवं डॉ नई दिल्ली , राम मनोहर लोहिया अस्पताल .  
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**DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI**  
**College of Nursing**

**Undertaking for Local Guardian**

I \_\_\_\_\_ (Parent's name) allow \_\_\_\_\_ (Local Guardian name)R/O \_\_\_\_\_ to be local guardian of my ward \_\_\_\_\_ (Name of Ward) of Course B.Sc.(H) Nursing.

In Case of any need/emergency he/she can be contacted at \_\_\_\_\_ (Mobile No.)

- I assure full co-operation as local Guardian of the applicant student & shall discharge my responsibility to the best of my ability.
- I undertake to identify you institution for any loss occurred due to any act of my Ward.
- I also undertake to pay all dues payable by the above students.
- In case she violets rules & regulations of the institution you may take strict action including cancellation of her admission from the college without any prior intimation.
- If the student is absent for more than 3 days ,she will have to meet the class teacher/co-ordinator along with the parents.

Parent's Signature

Parent's Name:- .....

Place:- .....

Date:- .....

Local Guardian Name & Signature

.....

.....

.....