

PROSPECTUS
FOR
SELECTION OF CANDIDATES

FOR
POST-BASIC B.SC.NURSING COURSE
IN THE COLLEGE OF NURSING,BERHAMPUR
DURING THE SESSION 2014-2015.

APPROVED BY THE
DEPARTMENT OF HEALTH & FAMILY WELFARE
GOVERNMENT OF ODISHA
(Vide Letter No. 10819-H/25.4.14)

Along with the application form candidate is to enclose A/c.payee Bank Draft of Rs.1000/-(Rupees One Thousand only) (in original) drawn in favour of "Director Nursing Odisha, Selection Fees" payable at State Bank of India, HOD Building Branch, Bhubaneswar.

IMPORTANT INFORMATION:

1. The prospectus and application form will be available on Govt. Website i.e., www.dmetorissa.gov.in (CLICK ALL EXAMINATIONS) from 05.05.2014 to 24.05.2014.
2. Last date and hour of receipt of application form 24.05.2014 by 5PM
3. Date of Entrance Examination 08.06.2014
4. Publication of list of qualified candidates 20.06.2014
5. Date of Counselling & Admission 09.07.2014
6. The course will start from 01.08.2014

NB: The above schedule is provisional and can be changed as per the requirement of administration with due intimation to the candidates.

Mailing Address: The complete Application Form along with enclosures should reach the “Convenor, Post Basic BSc. Nursing Selection Committee & Dy Director Nursing, Odisha, HOD Building, Bhubaneswar, Unit V- 751001” by 24.05.2014 up to 5P.M. by Registered Post/Speed Post/ Courier

GENERAL INFORMATION

1)SELECTION BOARD:

Selection of candidates for the Post Basic B.Sc. Nursing course shall be conducted by the Selection Committee consisting of following members:

- | | |
|---|------------------|
| 1. Director Nursing, Odisha | Chairperson |
| 2. Dean & Principal, MKCG, MC, Berhampur | Vice-Chairperson |
| 3. Joint Director of Nursing (Edn), Odisha | Member |
| 4. Principal, College of Nursing, Berhampur | Member |
| 5. Deputy Director of Nursing, Odisha | Convener |

2)DISTRIBUTION OF SEATS:

	CATEGORY	PERCENTAGE	NO.OF SEATS
i.	Unreserved		22
ii	S.T.	22.5%	09
iii	S.C.	16.25%	07
iv.	P.H.	3%	01

v. Children of Ex-servicemen & Servicemen	3%	01
Total		40

N.B: - (i) In case of non-availability of SC candidates S.T. candidates can be selected & vice-versa.

(ii) Further, in case of non-availability of candidates in any of the reserved category, the seats will be filled up by unreserved category candidates.

3)PROSPECTUS & APPLICATION FORMS:

3.1 Applications in the prescribed form are invited from the eligible candidates with GNM qualification for selection of candidates into Post-Basic B.Sc. Nursing course at the College of Nursing, Berhampur, Dist:-Ganjam, Odisha for the academic session 2014-2015.

3.2 The application form and the prospectus can be downloaded from the official website www.dmetodisha.gov.in from 05/05/2014 to 24/05/2014..

3.3 The complete application filled-in all respects along with enclosures and fees in shape of Bank Draft. amounting to Rs.1000/-(Rupee One Thousand)only drawn in favour of “Director Nursing, Odisha, Selection Fees” payable at State Bank of India, HOD Building Branch, Bhubaneswar, should reach the Convenor, Post Basic B.Sc.Nursing Selection Committee & Dy, Director of Nursing, Odisha, Bhubaneswar, by 24.05.2014 up to 5P.M. through Registered post/Speed Post/Courier. Applications received in any other manner will be rejected. Applications received after last date of receipt or envelope containing application of more than one individual shall be rejected.

3.4 Each envelope containing application shall be superscribed “**Application for admission into P.B. B.Sc.Nursing Course 2014-15**”.

3.5 The application form must be filled in by candidate in own hand writing. Corrections if any must be legible having initialed by the candidate.

4) ELIGIBILITY OF CANDIDATES::

To be eligible to apply for 2 years Post-Basic B.Sc. Nursing Course, a candidate: -

4.1 The minimum educational requirement shall be passing of GNM in an INC /ONMC recognized institute.

- 4.2 The candidate should be a Registered Nurse & Registered Midwife or equivalent with the Odisha Nurses & Midwives Council, Bhubaneswar for one year as on 31.05.2014
- 4.3 Must have passed +2 from CHSE Odisha or equivalent thereof.
- 4.4 Must not be more than 50 years of age as on 31.12.2014
- 4.5 Minimum two years of professional qualification as Staff Nurse as on 31.05.2014
- 4.6 Must have obtained a “No objection Certificate” from the Appointing Authority to take admission into the course.

N.B: - *i. Professional experience means experience as a Staff Nurse from any Govt. Hospitals, Govt. Undertaking Hospitals, Public Sector Undertaking Hospitals & Referral Hospitals /ESI Hospitals approved by the State Govt./Govt. of India for treatment of their employees.*

5) DOCUMENTS TO BE FURNISHED BY THE CANDIDATE ALONGWITH APPLICATION FORM:

The self attested photo copies of following documents should be attached with the application form (Enclosures to be serially numbered by the candidate) and original of the same should be produced on the date of counseling and admission. Under no circumstances, the enclosures/documents shall be accepted separately or after receipt of application form. A candidate failed to produce any document in original on the date of counseling her selection shall not be taken into consideration.

- i. HSCE from BSE, Odisha or equivalent pass certificate & marksheet
- ii. +2 from CHSE, Odisha or equivalent examinations pass certificate & marksheet
- iii. General Nursing & Midwifery from ONMEB or equivalent pass certificate & marksheet.
- iv. Up-to-date Registration Certificate of General Nursing & Midwifery.
- v. Caste certificate in the prescribed form (Supplied with Application form as Appendix-I) or prescribed by Govt.

- vi. Recent passport size photograph duly attested by a Gazetted Officer (on front side) & affixed in application form, Admit Card & Attendance Card.
- vii. Service experience certificate from competent authority.
- viii. No Objection Certificate from the appointing authority.
- ix. Certificate issued by the Community Development & Social Welfare Department / Panchayat Raj Department/District Social Welfare Officer, Govt. of Odisha for physically handicapped candidate
- x. Certificate in the prescribed form from the Station Commander/Officer Commanding/Officer in-Charge Zilla/Rajya Sainik Board in case of candidate claiming seat reserved for Children of Ex-servicemen/ Servicemen.
- xi. School Leaving Certificate/College Leaving certificate from the institution last studied.
- xii. One self-addressed envelope (23” X 10”) affixing postage stamp Rs.6/-
- xiii. One self-addressed envelope (23” X 10”) affixing postage stamp Rs.39/-
- xiv. Original bank draft for Rs.1000/- must be attached.
- xv. Migration certificate in original in case of candidates passed other than Berhampur University/CHSE.(Not mandatory to enclose with the application form)
- xvi. As per INC New Delhi letter of dated 03.01.2012 the candidates has to furnish an affidavit to the effect that she is attending P.B. B.Sc.Nuring course regularly and nor working in any institution during her study period.(To be submitted on the date of counselling).

6) ENTRANCE EXAMINATION:

The entrance examination will be of 3 hours duration containing 150 Multiple choice questions of G.N.M. standard involving all subjects taught in G.N.M.. The questions will be of multiple choice type containing four answers of which one is correct. Four marks will be awarded for answering each correct answer and One mark to be deducted for each wrong answer.

In case of tie over the marks , the date of birth of the candidates will be taken into account and the older one shall be preferred for selection over the younger.

7)SELECTION:

Admission of candidates by counseling into Post Basic B.Sc.Nursing course shall be made from the merit list prepared on the basis of marks obtained in the entrance examination.

7.1 If a candidate found to have furnished any false Information /documents/testimonials, the admission of the candidate shall be cancelled at any stage of her admission without any further notice and legal action as deemed proper shall be taken.

8) DISCONTINUANCE:

Discontinuance of training in mid-academic session or mid-course is not permissible. In case, such an instance occurs the candidate concerned will be debarred for such training for next three years and at the same time the period of study will be treated as leave due as admissible.

9) FEES:

(For Nursing Personnel working in Govt.sectors)

The following fees are to be deposited at the time of admission into 1st.Year / 2nd.Year Post-Basic B.Sc.Nursing course.

FEES	1 ST .YEAR	2 ND . YEAR
1.Admission/Tuition fee	Rs.10000.00	Rs.10000.00
2.Caution money	Rs. 500.00 (refundable)	NIL
Total	Rs.10500.00	Rs.10500.00

- I) This excludes payments for purchase of required books, advance for messing etc.
- II) The University fees will be collected at the current rate.

10. HOSTEL ACCOMMODATION:

- I. Allotment of rooms in the hostel shall be made by a Committee chaired by the Principal and subject to availability. If any student is found to be involved in immoral activities, unruly and undisciplined conduct she will be punished by the Committee chaired by the Principal, College of Nursing, Berhampur under intimation to the Director Nursing, Odisha.
- II Boarder shall have to abide by the rules and regulations of the Hostel failing which their allotment shall be cancelled without any further notice.
- III Boarder of the Hostel shall be a member of common mess.
- IV. The boarders of the Hostel shall not be allowed to use heater, iron, geaser, etc. And, if noticed, necessary action as deemed proper will be taken against them.
- IV. Visitors shall not be allowed without permission of the Hostel Matron.

11. UNIFORM:

Selected candidates are to bring Pink colour saree, pink blouse & White coat as they require to wear them while performing duty in wards and fields.

12. LEAVE:

Four weeks vacation shall be allowed during an academic year. However, the student has to secure 80% of attendance in theory subjects & 100% in practicals to appear the University examinations as per INC & Berhampur University regulations.

13. STIPEND

Contractual Staff Nurses working under Health & Family Welfare Department selected for Post Basic B.Sc.Nursing course will be allowed a stipend of Rs.2000/- per month in lieu of their contractual remuneration vide OM No. ME II-IXM-2/08 16783/H. dated 16.07.2008.

Such Staff Nurses joining the Post Basic B.Sc.Nursing course shall have to sign a bond in appropriate form to serve the State for five years after completion of course and in case failing to serve for five years shall be required to refund the total stipend amount received which may also be recovered under the provisions of OPDR Act.

14. DISCIPLINE

(a) The student has to abide by the rules and regulation of the College.

(b) If any student found misconduct will be punished as per rule.

(c) AS per decision of honourable Supreme Court of India passed in W.P.No.14356/2005 WPC No.173/2006 AND SLP (c) No-24296-24299/2004 if any incident of ragging comes to the notice of the authority, the concerned student shall be given liberty to explain and if his/her explanation is not found satisfactory, the authority would expel her/him from the institution.

**(APPLICATION FOR ADMISSION INTO 2YEARS POST-BASIC
B.SC.NURSING COURSE-2014-2015)**

(For office use only)

- (i) **Course** : Post-Basic B.Sc.Nursing
- (ii) **Academic session** : 2014-15
- (iii) **Application No** :
- (iv) **Code No** :

Space for
photograph

(To be filled in by the Candidate)

- 01. Name(in block letters)** ...
- 02. Designation** ...
- 03. Date of birth as recorded in Matric Certificate...**
- 04. Name of**
- a. Father** ...
- b. Mother** ...
- C. Spouse(in case of married)** ...
- 05. Relationship with the guardian** ...
- 06. Present Office Address** ...
- 07. Permanent Home Address** ...
- 08. Religion** ...
- 09. Nationality** ...
- 10. Marital Status** ...
- 11. Category- S.C./S.T./Backward/General** ...
- 12. Registration Number of Nurse** No.....Date.....
- 13. Registration Number of Midwifery** ...No.....Date.....
- 14. T.N.A.I. membership number** ...No.....Date.....

15. Berhampur University Registration NumberDate.....

16. Do you want hostel accommodation ...

17. Payment

18. Period of Service

Attach certificates from the competent authority in chronological order

S/N.	Post Held	Period		Place of Posting	Total period
		From	To		
I					
II					
III					
IV					
V					

19. Particulars of Academic Qualifications:

S/N.	Examinations Passed	Name of the Board/University	Full Marks	Marks secured	Percentage of Mrks
HSC					
Intermediate/ +2 Arts/Sc//Com.					

20. Particulars of Professional Qualifications:

Examinations Passed	Name of the Institution	Mars secured out of the total marks	Percentage of marks obtained
GNM			

DECLARATION

I declare that the above statement of particulars furnished by me are true in all respects and as such I undertake that if subsequent to my admission, I will be found to have given any wrong information with regarding to marks, certificate and documents produced by me in connection with my admission, then my name will be immediately removed from the College in addition to whatever the legal action that be taken against me. I agree to abide by the rules of the College and Hostel and pay all fees and deposit

all other dues as laid down in the prospectus. Further I will submit myself to the disciplines in the jurisdiction of the Vice-Chancellor of the Berhampur University and the Principal, College of Nursing, Berhampur who may be vested with the authority to exergates discipline frame or as under the University.

Signature of the applicant in full.

Date.....

APPENDIX I

Form of certificate of Scheduled Caste and Scheduled Tribe Candidates

This is certify that
Smt. _____ **daughter of**
Shri _____ **Village** _____
Town _____
Thana _____ **Dist** _____ **belonging to the**
_____ **Caste / Tribe /**

Sub-caste which is recognized as a Scheduled Caste/Tribe under the (Scheduled Caste and Scheduled Tribe) lists modification orders of 1986.

Smt. _____ **and or her family ordinarily**
resides in the
Village _____ **P.O.** _____ **Dist** _____.

Signature of the Competent Authority.

Please delete the words which are not applicable

Competent authority: District Magistrate /Additional District Magistrate/Subdivisional Officer/ Tahasildar/Additional Tahasildar.

**MEDICAL FITNESS CERTIFICATE FOR ADMISSION AT THE
COLLEGE OF NURSING, BERHAMPUR**

- | | |
|-----------------------------|-------|
| 1. Name of the applicant | ... |
| 2. Father's/Husband's Name | ... |
| 3. Office address | ... |
| 4. Chest X ray or screening | ... |
| 5. Stool Examination | ... |
| 6. Urine Examination | ... |
| 7. Albumin | ... |
| 8. Sugar | ... |
| 9. Physical Examination | |
| Heart | Lungs |
| Eyes | Nose |
| Ears | Liver |
| Spleen | B.P. |
| 10. Blood Group | ... |

Certified that in my opinion, the applicant
is physically fit to undergo any Nursing educational training programme having continued field
training programme.

Signature & designation of the authorized

Medical Officer

Signature of the candidate is attested by me.

Medical Officer

ACKNOWLEDGEMENT

(To be filled by the Candidate)

To,

Smt. _____

C/o.. _____

At: _____

Po: _____

Dist: _____

State: _____ **PIN** _____

1. This acknowledges receipt of your application for Post-Basic B.Sc. Nursing course-2014-2015.
2. Your reference No. is _____/
3. Please quote the above reference no in any correspondence made with the office of the Convenor.

Convenor

**Post-Basic B.Sc.Nursing Selection Committee
& Dy Director Nursing(O)**

ENTRANCE EXAMINATION FOR POST BASIC B.SC.NURSING SELECTION,
2014-2015
ADMIT CARD

Name of the Candidate: _____
(The applicant has to write her name in BLOCK LETTER in full)
Roll No. _____

Examination Centre

Time : 10.00A.M. Date:
NOTE:

1. Issue of this card does not necessarily mean acceptance of eligibility
2. Please do not detach the attendance card.

Paste a recent
photograph
Size(40 X
50mm)

Full Signature of the Candidate

(In Capital Letters)

Convenor
Post Basic B.Sc..Nursing Selection
Committee

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ENTRANCE EXAMINATION FOR POST BASIC B.SC.NURSING SELECTION,
2014-2015
ATTENDANCE CARD

Name of the Candidate: _____
(The applicant has to write her full name)
Roll No _____

Examination Centre

Q & A Booklet No

Hall No

Seat No

Full Signature of the Candidate
(to be signed in the presence of Invigilator)
_____ Centre

Signature of the Invigilator

Hall

No. _____

(If the admit card is not received by the post you are requested to contact and collect the same from the office of the Convenor within two days prior to the date of examination).