



**Government College of Nursing  
Dr. Shankarrao Chavan Govt. Medical College &  
Hospital, Vishnupuri, Nanded – 431606 (M.S.)**



**Welcomes...B. Sc. (Nursing) Students joining  
the Institute for A.Y. 2025-2026**

**Contact Number - 02462-229123**

**(10AM to 5PM only)**

**DON'T CALL ON THE PERSONAL No. OF PRINCIPAL / NODAL OFFICER**



## शासकीय परिचर्या महाविद्यालय (बी.एस्सी), विष्णुपूरी, नांदेड

डॉ. शंकरराव चव्हाण शासकीय वैद्यकीय महाविद्यालय व रुग्णालय, विष्णुपूरी, नांदेड

**GOVERNMENT COLLEGE OF NURSING (B.Sc.), VISHNUPURI, NANDED**

DR. SHANKARRAO CHAVAN GOVT. MEDICAL COLLEGE & HOSPITAL, VISHNUPURI NANDED

PHONE NO. 02462-229123

E Mail - gcongmcnanded22@gmail.com

### **NOTIFICATION (For MH- Nursing-CET 2025 Admissions)**

All the selected students of MH- Nursing-CET 2025 allotted seat at **Government College of Nursing, Dr. Shankarrao Chavan Government Medical College Campus, Vishnupuri, Nanded-431606 (M.S.)** should follow instructions given below and accordingly report with all documents required for admission process.

1. **Download & print this PDF file. Read All Details Carefully**
2. Print and fill 4 copies of Application Form,
3. Print and fill 4 copies of Holding Certificate
4. Print and fill 4 copies of Candidate information.
5. Print and fill 4 copies of Admission Office Order.
6. Print and fill 2 copy of Medical Fitness in the prescribed format ONLY.
7. All **Original Documents** enlisted in the holding certificate & **Two Sets of SELF ATTESTED Photocopies** of all documents.
8. One pen Drive – In Pen Drive Scan All Original Documents **in PDF Format only**. Student should scan document properly through computer scanner (**Size 500 kb**). Add Soft copy of Students 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

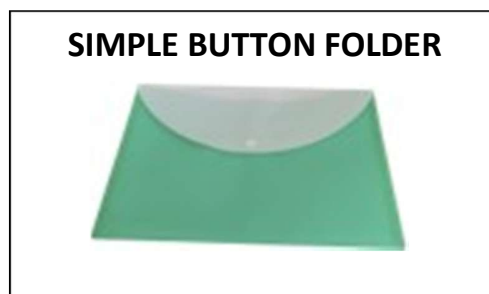
**Nationality- Sachin Aher (Name of Student)**

Create a Folder in Pen Drive and **Rename it with Name of the student**. Keep all scanned documents in this folder.

9. The Demand Drafts (D.D.) of desired Fees should not have any **Error/Spelling Mistakes** in the name.

**Cash / Cheque will NOT be acceptable.**

10. Other Letters / undertakings if required will be taken at the time of admission if permissible within the rules thereof.
11. **Kindly note.... Admission Process requires verification and approval. No student will be given Joining letters urgently.**
  - I. Students are advised to read details of admission process in information brochure / FAQs / other notifications available on <https://cetcell.mahacet.org/> and for state admissions (Maharashtra state) on state commissioner admission cell official website. The institute is responsible ONLY for admissions; students are advised to check official websites for any queries.
  - II. Students are strictly advised NOT TO EDIT ANY FORMATS. All formats should be filled by student in his/her own handwriting.
12. Submit all documents in a simple button file folder as below:



**Sd/-**  
**PRINCIPAL**  
**Govt. College of Nursing,**  
**Dr.Shankarrao Chavan GMC & H.**  
**Vishnupuri,Nanded-431606 (M.S.)**

**Govt. College of Nursing**

**Dr. Shankarrao Chavan Govt. Medical College, Vishnupuri, Nanded**

Ref. No. Dr.SCGMCN/SS/CET/BSc.Adm./ /2025

Dated: / /2025

**Document Holding Certificate**

Received all Original Documents From .....  
for 1st BSc Nursing admission through MH-Nursing-CET 2025 entrance exam in .....  
Under All India Quota/State Quota/GOI Quota (2025-26) as follows:

Sr. No	<b>Original Documents list of Student</b> Certificates Submitted (Original Set +2 Sets of Xerox copies duly self-attested)				<b>Available</b> YES/NO
01	Photo Identity Proof ( Aadhaar Card)				
02	Voter ID <b>OR</b> ANNEXURE – C				
03	Nationality and Domicile Certificate/Valid Indian Passport				
04	S.S.C. Passing certificate (Date of Birth Proof)				
05	H.S.C Mark sheet				
06	MH- Nursing-CET 2025 Online Application form				
07	Admit Card of MH- Nursing-CET 2025				
08	MH- Nursing –CET 2025 Mark sheet				
09	Selection Letter AIEE/GOI				
10	Caste certificate				
11	Caste Validity certificate				
12	Non-creamy layer certificate up to 31/03/ 2026 (For VJ,NT-1,2,3 and OBC,SBC)				
13	College Leaving Certificate (LC/TC)				
14	Physical Fitness Certificate				
15	Migration Certificate				
16	Gap certificate.				
17	Defense Certificate (Certificate from Zillah Sainik Board Domicile Certificate of Parent (D-1 and D-2) Transfer Order of Parent for D-3				
18	Person with Disability Certificate				
19	EWS Certificate				
20	Orphan Certificate as per page no. 93 of MH-Nursing CET 2025				
22	Hilly Area Certificate, Domicile Cert. of Parent, School Cert.				
23	Undertaking Form / Joint Undertaking				
24	Income Certificate				
25	D.D No	Name of Bank	Amount	Date	Remark YES/NO
				/ /2025	
			Rs.797/-	/ /2025	
	Admission Rec. No:-		Rs.1500/-	/ /2025	

**Note: Keep All Original Documents Clearly Scanned in PDF File Format (Size: Up to 500Kb) In Pen Drive (With proper Name) And Submit the Pen Drive to College at The Time of Admission for Eligibility purpose.**

**VERIFYING OFFICER**

**Principal**  
**Govt. College of Nursing**  
**Dr. S.C.G.M.C.H. Vishnupuri, Nanded.**

**FORM-B**  
**For Detailed Information of Candidates**

**COLLEGE ROLL NO.** \_\_\_\_\_

**Govt. College of Nursing, Dr. SHANKARRAO CHAVAN  
GOVT. MEDICAL COLLEGE, VISHNUPURI, NANDED-431606**

LATEST  
PHOTOGRAPH

**ADMISSION TO FIRST BSc Nursing COURSE FOR ACADMIEC YEAR 2025-26**

A) **NAME OF THE CANDIDATE** Shri/Ku.: \_\_\_\_\_

**EMAIL ID:** \_\_\_\_\_ **(Mob.NO.)** \_\_\_\_\_

**AADHAR NO:** \_\_\_\_\_ **VOTER ID NO:** \_\_\_\_\_

B) **FATHER'S NAME:** Shri \_\_\_\_\_

**EMAIL ID:** \_\_\_\_\_ **(Mob.NO.)** \_\_\_\_\_

C) **MOTHER'S NAME:** Smt. \_\_\_\_\_

**EMAIL ID:** \_\_\_\_\_ **(Mob.NO.)** \_\_\_\_\_

D) **Permanent Address:** \_\_\_\_\_

**PIN CODE:** \_\_\_\_\_ **Domicile State:** \_\_\_\_\_

**Address for Correspondence:** \_\_\_\_\_

\_\_\_\_\_ **PIN CODE:** \_\_\_\_\_

E) **DATE OF BIRTH :** \_\_\_\_/\_\_\_\_/\_\_\_\_ **PLACE OF BIRTH :** \_\_\_\_\_

**TALUKA :** \_\_\_\_\_ **DISTRICT :** \_\_\_\_\_ **STATE:** \_\_\_\_\_

F) **MOTHER TONGUE :** \_\_\_\_\_

G) **CASTE :** \_\_\_\_\_ **CATEGORY :** \_\_\_\_\_ **RELIGION :** \_\_\_\_\_

H) **COLLEGE FROM WHICH H.S.C. PASSED :** \_\_\_\_\_

**ADDRESS OF COLLEGE:** \_\_\_\_\_

**HSC PASSING YEAR** \_\_\_\_\_ **& MONTH:** \_\_\_\_\_

I) **MH-Nursing-CET 2025 Application Form No. :** \_\_\_\_\_

J) **MH-Nursing-CET ROLL NO. :** \_\_\_\_\_

K) **MH- Nursing-CET MARKS :** \_\_\_\_\_ **/100 INDIA RANK :** \_\_\_\_\_

L) **DATE OF COUNSELING BY DMER/DGHS :** \_\_\_\_\_

M) **QUOTA ALLOTTED (All India, State, Def, PH,HA,GOI.) :** \_\_\_\_\_

N) **H.S.C. AGGREGATE MARKS :** \_\_\_\_\_ **AND %** \_\_\_\_\_ **TOTAL PCB** \_\_\_\_\_ **AND %** \_\_\_\_\_

**And TOTAL PCBE** \_\_\_\_\_ **AND %** \_\_\_\_\_

**Physics :** \_\_\_\_\_ **Chemistry :** \_\_\_\_\_ **Biology :** \_\_\_\_\_

**Marks (Applicable) :Eng :** \_\_\_\_\_ **/ Urdu :** \_\_\_\_\_

O) **Awards :** \_\_\_\_\_

P) **Scholarship :** \_\_\_\_\_

Q) **Sports (If represented state / District) :**

**Name &Year :** \_\_\_\_\_

**Note: - Give The Three Latest Passport size photo with This from.**

**PARENT'S SIGNATURE**

**STUDENT'S SIGNATURE**

**VERIFYING OFFICER**

*Principal*  
*Govt. College Of Nursing*  
*Dr. S.C.G.M.C. H. Vishnupuri, Nanded.*

## Application for admission

**Recent  
Passport  
Size  
Photograph**

Name: - \_\_\_\_\_

Address: - \_\_\_\_\_  
\_\_\_\_\_

Mobile No. Student : - \_\_\_\_\_

E-mail Address of Student: - \_\_\_\_\_

Mobile No. Parent :- \_\_\_\_\_

Date: :-        /        /2025

To,

The Principal,  
Govt. College of Nursing,  
Dr.Shankarrao Chavan  
Govt. MCH Vishnupuri,  
Nanded. (MS)

**Sub: - Joining in BSc. Nursing Course at Govt. College of Nursing, Dr. Shankarrao  
Chavan, Govt..Medical. College & Hospital, Vishnupuri, Nanded. (M.S.)**

Respected/Sir,

I the undersigned Shri. /Kum. \_\_\_\_\_

has been selected for BSc. Nursing Course at Government College of Nursing, Dr. Shankarrao Chavan Govt. Medical College & Hospital, Vishnupuri, Nanded. (M.S.) as per the Selection letter of All India / State list.

Kindly enroll me in your college as I<sup>st</sup> BSc. Nursing student for Academic Year 2025-2026.

Thanking you.

Yours faithfully,

Signature of candidate

(Name: \_\_\_\_\_)

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To,

Subject: Regarding Non-Submission of Original Certificates.

I am selected for admission to BSc Nursing Course in the year 2025-2026 at Govt. College of Nursing, Dr. Shankarrao Chavan Government Medical College & Hospital, Vishnupuri, Nanded.

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_

Thanking you.

Place - Nanded.

$$(\quad)$$



# JOINT UNDERTAKING

(For All Newly Admitted Students)

Name of the Student: \_\_\_\_\_

Roll No.: \_\_\_\_\_

**Government College of Nursing, Dr. Shankarrao Chavan Govt.  
Medical College, Vishnupuri, Nanded-431606.**

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 Up to Rs 10,000/-** (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 : Nanded

Name & Signature of Student

Date: \_\_\_\_/\_\_\_\_/2025

Name & Signature of Parent

Signature  
Member Secretary  
Anti Ragging Committee

Signature  
Principal, Govt. College Of Nursing,  
Dr. SCGMC, Vishnupuri, Nanded

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

**DETAILS OF FEES TO BE PAID BY FIRST BSc NURSING STUDENTS AT THE TIME OF ADMISSION TO GOVT. COLLEGE OF NURSING, DR. SHANKARRAO CHAVAN GOVT. MEDICAL COLLEGE, NANDED FOR THE YEAR 2025-2026.**

**FEES: To be submitted as Demand Draft Details (DD)**

**For BSc. Nursing Admission in the year 2025-26 Selected students are instructed to submit the DD as follows *Demand drafts to be drawn from Nationalized Banks.***

***(Errors or spelling mistakes in the DD will not accepted)***

<b>Fees</b>	<b>Category</b>	<b>Admission Quota/Remarks</b>
<b>Rs.26600 /-</b>	<ul style="list-style-type: none"> <li>• OPEN</li> <li>• Unreserved (UR) &amp; Reserve (R)- All outside Maharashtra students</li> </ul>	<ul style="list-style-type: none"> <li>• All India Quota(AIQ)</li> <li>• State of Maharashtra Quota</li> </ul>
<b>Rs.3500 /-</b>	<b>Reserve &amp; Women</b> (Only for Maharashtra state candidates)	<ul style="list-style-type: none"> <li>• <b>All Students of AIQ &amp; State quota, belonging to Maharashtra &amp; from reserve category.</b></li> <li>• It will be compulsory to submit Maharashtra Domicile certificate, Caste certificate, Caste validity &amp; NCL valid up to 31<sup>st</sup> March 2026 (NCL required for all reserve category students of Maharashtra EXCEPT: SC &amp; ST) for fees claim.</li> <li>• <b>Undertaking NOT ACCEPTABLE for category documents.</b></li> <li>• Refer information brochure of state for further details.</li> </ul>
<b>Rs.15050 /-</b>	<b>EWS</b> (Only for Maharashtra state candidates)	<ul style="list-style-type: none"> <li>• <b>All Students of AIQ &amp; State quota, belonging to Maharashtra &amp; from EWS category.</b></li> <li>• Must have claimed and allotted EWS category in selection list.</li> <li>• EWS certificate(Annexure-A)</li> <li>• <b>Undertaking NOT ACCEPTABLE for EWS certificate.</b></li> </ul>

1. Fees Demand Draft in Favor of: **ADMINISTRATIVE OFFICER, GOVT. COLLEGE OF NURSING, Dr. S.C.G.M.C.H, VISHNUPURI, NANDED (Payable at Nanded)**

2. Fees Demand Draft in Favor of: **NATIONAL INSURANCE CO-LTD. (Payable at Kolhapur) RS 797 /- (Seven Hundred and Ninety-Seven rupees only)**

**Note:**

- Please Note Cash / Cheque will not be accepted.
- Changes in fees structure as per the instructions of state Govt. will be applicable from time to time.
- The demand draft will be deposit in the institute account only after cut-off date of admission process.

- If students are allotted another college in subsequent rounds of All India / state, DD will be refunded back to the student. All such students will be required to pay an amount of **Rs.1500/- Cash** (Admission Cancellation fees) to be paid in cash section of institute & Receipt to be deposited in college.
- **PENALTY:** Penalty for Lapse of seat at Government/Government Aided/Private unaided College (B.Sc Nursing Course): Any candidate who resigns a seat after cutoff date from Government / Government Aided / Private unaided College (B.Sc Nursing Course) will have to pay **Rs. 1,50,000/- (Rs. One lakh fifty thousand only)** as penalty which will include 1st year tuition fees. If the candidate has paid the tuition fees to the institute, he/she will have to pay the difference amount only. If the candidate has not paid the tuition fees, he/she will have to pay Rs. 1,50,000/- (Rs. One lakh fifty thousand only).
- If required, further instructions regarding fees will be given during admission process.

<b>Govt. College of Nursing Dr. Shankarrao Chavan Govt. Medical College &amp; Hospital Vishnupuri, Nanded</b>				
<b>Details of Fees for First year B.Sc. Nursing For the Year 2025-26</b>				
<b>Sr.NO</b>	<b>Fees</b>	<b>Open Category</b>	<b>Reserve Category and Women (for Maharashtra students only)</b>	<b>EWS (For Maharashtra students only) (GR-201805031517347613, dated 03-05-2018)</b>
1	Tuition Fees (Per Annum)	23100	- -	11550
2	Admission Fees (One time)	1500	1500	1500
3	Library Fees (Per Annum)	1000	1000	1000
4	Library Deposit (Deposit)	2000	2000	2000
5	Gymkhana (Per Annum)	500	500	500

1. Students desirous of availing Amartya Shikshan Yojana Insurance scheme shall submit Demand Draft of Nationalized Bank of Rs. 797/- In Name of **National Insurance Co. Ltd., payable at Kolhapur., at the time of admission.**
2. Cash Fees are to be paid at the Cash Counter, Govt. College of Nursing, Dr.S.C.G.M.C, NANDED from 11.00 a.m. to 1.30 p.m. and from 2.30 p.m. to 3.30 p.m.
3. Those students who want Bonafide Certificate shall pay Rs 100/- at the Cash Counter, Govt. College of Nursing, Dr.S.C.G.M.C, NANDED from 11.00 a.m. to 1.30 p.m. and from 2.30 p.m. to 3.30 p.m.
4. Student should pay MUHS Enrollment and Eligibility fess later, as per the guidelines of University.

## **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 limbs,
- (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 2025 – 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. \_\_\_\_\_ For-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 2025
- ☐ Copy of Date application Form (Latest)
- ☐ MH-B.Sc Nursing-CET 2025 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 - I)

**If applicable**

- ☐ Caste Certificate
- ☐ Caste Validity Certificate
- ☐ Non Creamy Layer Certificate valid upto 31/03/2026 (VJ, NT1, NT2, NT3, SEBC, OBC including SBC)

**Specialized Reservation**

- ☐ OJ/OB/OB : Ex-servicemen Certificate, actual service certificate
- ☐ OJ/OB : Domicile Certificate of Defense person
- ☐ OJ : Teacher certificate
- ☐ Person with disability Certificate (PMD)
- ☐ EWS Eligibility Certificate
- ☐ Orphan Certificate

**Signature with date of Check**