



**Government College of B. Sc. Nursing
Swami Ramanad Teerth Rural Govt. Medical
College, Ambajogai (M.S.)-431517**

**Welcomes...B. Sc. (Nursing) Students joining
the Institute for A.Y. 2026-2027**

Contact Number - 8830017011

(10AM to 5PM only)

Government College of B. Sc. Nursing
Swami Ramanad Teerth Rural Govt. Medical College,
Ambajogai (M.S.)-431517

NOTIFICATION (For MH- Nursing–CET 2026 Admissions)

Here are the instructions for students allotted a seat at **Government College of B. Sc. Nursing of Nursing, Swami Ramanad Teerth Rural Govt. Medical College, Ambajogai (M.S.)-431517**

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. Bring all original certificates and documents as per the admission guidelines.
Tick in front of All appropriate **Original Documents** in the holding certificate
8. Bring **Two Sets of SELF ATTESTED Photocopies** of all appropriate documents.
9. All **original documents** must be scanned **individually in PDF format** (Size 500 kb only). Load it in a pen drive and submit the loaded pendrive to college. This is compulsory for admission. **Please don't use mobile scanner for scanning documents.**

Each original document must be scanned as a separate PDF file. Name each file clearly and appropriately. **e.g.** Nationality certificate, after scanning should be renamed as

Nationality- Sachin Aher (Name of Student)

Create a folder on a pen drive. Rename the folder with the student's name.

10. Students must ensure there are no errors or spelling mistakes in the name on the Demand Draft (D.D.) for the desired fees. Any such mistakes will not be accepted.

Cash / Cheque will NOT be acceptable.

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



Principal
Govt. College of B.Sc. Nursing
SRTR Govt. Medical College, Ambajogai.

Government College of B. Sc. Nursing

Swami Ramanad Teerth Rural Govt. Medical College, Ambajogai (M.S.)-431517

Ref. No. GCON/BSc.Adm./

/2026

Dated:

/

/2026

Document Holding Certificate

Received Original Documents From for
BSc Nursing admission through MH-Nursing–CET 2026 entrance exam Under All India Quota/State
Quota/GOI Quota (2026-27) as follows:

Sr. No	Original Documents list of Student Certificates Submitted (Original Set +2 Sets of Xerox copies duly self-attested)				Available YES/NO
01	Photo Identity Proof (Aadhaar Card)				
02	Voter ID OR 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	Admit Card of MH- Nursing–CET 2026				
07	MH- Nursing –CET 2026 Mark sheet				
08	Selection Letter AIEE/GOI/CET				
09	Cast certificate				
10	Cast Validity certificate				
11	Non-creamy layer certificate up to 31/03/ 2027 (For VJ-A,NT-B NT-C NT-D, OBC, SBC and SEBC)				
12	College Leaving Certificate (LC/TC)				
13	Physical Fitness Certificate				
14	Migration Certificate				
15	Gap certificate.				
16	Defense Certificate (Certificate from Zillah Sainik Board Domicile Certificate of Parent (D-1 and D-2) Transfer Order of Parent for D-3				
17	Person with Disability Certificate				
18	EWS Certificate				
19	Hilly Area Certificate, Domicile Cert. of Parent, School Cert.				
20	Undertaking Form / Joint Undertaking				
22	Income Certificate				
23	D.D No	Name of Bank	Amount	Date	Remark YES/NO
			Rs. /-	/ /2026	
			Rs. /-	/ /2026	
			Rs. /-	/ /2026	
	Total				

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

VERIFYING OFFICER

Principal
Govt. College of B.Sc. Nursing
SRTR Govt. Medical College, Ambajogai.

FORM-B
For Detailed Information of Candidates

LATEST
PHOTOGRAPH

COLLEGE ROLL NO. _____

Govt. College of B.Sc. Nursing, SRTR Govt. Medical College, Ambajogai.

ADMISSION TO FIRST BSc Nursing COURSE FOR ACADMIEC YEAR 2026-27

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 : ____/____/____ (Before 31/12/2009)

PLACE OF BIRTH : _____ TALUKA : _____ DISTRICT : _____

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 2024 Application Form No. : _____

J) MH-Nursing-CET ROLL NO. : _____

K) MH- Nursing-CET MARKS : _____ /100 INDIA RANK : _____

L) DATE OF COUNSELING BY DMER : _____

M) QUOTA ALLOTTED (All India, State, Def, PH,HA,GOI.) : _____

N) H.S.C. AGGREGATE MARKS : _____ AND % _____ TOTAL PCB _____ AND % _____

Physics : _____ Chemistry : _____ Biology : _____

Marks (Applicable) :Eng : _____

Note: - Give four Latest Passport size photo with This from.

PARENT'S SIGNATURE

STUDENT'S SIGNATURE

VERIFYING OFFICER

Principal
Govt. College of B.Sc. Nursing
SRTR Govt. Medical College, Ambajogai.

Application for admission

**Recent
Passport
Size
Photograph**

Name: - _____

Address: - _____

Mobile No. Student : - _____

E-mail Address of Student: - _____

Mobile No. Parent :- _____

Date: :- / /2026

To,

The Principal,
Govt. College of B.Sc. Nursing,
SRTR Govt. Medical College,
Ambajogai.

Sub: - Joining in BSc. Nursing Course at Govt. College of B.Sc. Nursing, SRTR Govt. Medical College, Ambajogai.

Respected/Sir,

I the undersigned Shri. /Kum. _____

has been selected for BSc. Nursing Course at **Govt. College of B.Sc. Nursing, SRTR Govt. Medical College, Ambajogai.** (M.S.) as per the Selection letter of All India / State list.

Kindly enroll me in your college for Academic Year 2026-2027.

Thanking you.

Yours faithfully,

Signature of candidate (Name:_)

$$\left(\begin{array}{c} \text{ } \\ \text{ } \\ \text{ } \end{array} \right)$$

DETAILS OF FEES TO BE PAID BY FIRST BSc NURSING STUDENTS AT THE TIME OF
ADMISSION TO Govt. College of B.Sc. Nursing, SRTR Govt. Medical College, Ambajogai. FOR THE
YEAR 2026-2027.

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

For BSc. Nursing Admission in the year 2026-27 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)

Fees	Category	Admission Quota/Remarks
Rs.34400 /- 1. (D.D. Rs. 25400) 2. (D.D. Rs. 5000) 3. (D.D. Rs. 4000)	OPEN Unreserved (UR) & Reserve (R)- All outside Maharashtra students	• All India Quota (AIQ) • State of Maharashtra Quota
Rs.9000 /- 1. (D.D. Rs. 5000) 2. (D.D. Rs. 4000)	Reserve (Only for Maharashtra state candidates)	• All Students of AIQ & State quota, belonging to Maharashtra & from reserve category. • It will be compulsory to submit Maharashtra Domicile certificate, Caste certificate, Caste validity & NCL valid up to 31st March 2027 (NCL required for all reserve category students of Maharashtra EXCEPT: SC & ST) for fees claim. • Undertaking NOT ACCEPTABLE for category documents. • Refer information brochure of state for further details.
Rs.21700 /- 1. (D.D. Rs. 12700) 2. (D.D. Rs. 5000) 3. (D.D. Rs. 4000)	EWS (Only for Maharashtra state candidates)	• All Students of AIQ & State quota, belonging to Maharashtra & from EWS category. • Must have claimed and allotted EWS category in selection list. • EWS certificate (Annexure-A) • Undertaking NOT ACCEPTABLE for EWS certificate.

1. Fees Demand Draft in Favor of: **PL ACCOUNT DEAN AND CASHIER**

(Payable at Ambajogai), Address: SRTR Government Medical College, Ambajogai-431517

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.

- 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.
- If required, further instructions regarding fees will be given during admission process.

Govt. College of B.Sc. Nursing, SRTR Govt. Medical Rural College, Ambajogai.				
Details of Fees for First year B.Sc. Nursing For the Year 2026-27				
Sr.NO	Fees	Open Category	Reserve Category and Women (for Maharashtra students only)	EWS (For Maharashtra students only) (GR-201805031517347613, dated 03-05-2018)
1	Tuition Fees	25400	- -	12700
2	Admission Fees	1500	1500	1500
3	Library Fees	1000	1000	1000
4	Library Deposit	2000	2000	2000
5	Gymkhana	500	500	500
6	Hostel Fees	4000	4000	4000
	Total	34400	9000	21700

1. Those students who want Bonafide Certificate shall pay Rs 100/- at the Cash Counter, Govt. College of Nursing, SRTRGMC Ambajogai.
2. MUHS University Enrollment and Eligibility Fees are to be paid later on, as per the instructions of MUHS, Nashik.

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