

# Jubilee Mission School of Nursing



Jubilee Mission Hospital Trust - Archdiocese of Trichur

P.B. No. 737, Jubilee Gardens, Jubilee Mission PO, Thrissur East - 680 005, Kerala, India

Tel: 0487 242 8010 (School Office), 242 1885 (Office Supdt.), 243 2200, 246 1000, (Hospital)

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## Application Form for Admission to G.N.M. (2026-27)

### Diploma in General Nursing & Midwifery Course

<b>Application No:</b>		<b>JMC.....</b>							
<b>Name of the Applicant (As in SSLC Book)</b>									
<b>Date of Birth &amp; Age</b>									
<b>Place of Birth:</b>									
<b>Gender:</b>									
<b>Blood Group:</b>									
<b>Caste:</b>						<b>Religion:</b>			
<b>Category:</b> Kindly mark Tick (✓) against the relevant box		General	SC	ST	OBC	If CATHOLIC, Specify Syro-Malabar / Syro-Malankara / Latin Catholic			
						If NOT CATHOLIC, specify Christian Denomination			
<b>Handicapped :</b> (Yes/No)						If CATHOLIC, Specify the Diocese & Parish			
<b>Permanent Address with PIN Code</b>					<b>Address for Communication with PIN code</b>				
<b>Name of Father &amp; Occupation:</b>									
<b>Name of Mother &amp; Occupation:</b>									
<b>Telephone</b> (Land Line, if available):									
<b>Contact Mobile Number 1:</b>									
<b>Contact Mobile Number 2:</b>									
<b>Contact E-mail ID:</b>									
<b>Average Annual Family Income:</b>									
<b>Aadhar Number of Candidate:</b>									

Details of 10<sup>th</sup> & 12<sup>th</sup> Standard Examinations:

Std.	Name of the Institution Studied	Name of the Board	Reg. No.	Year
X				
XII				
Others				

**Marks Obtained in Plus Two / Qualifying Examination :**

Subject	Marks Scored	Maximum Marks	% / Grade
Part I :Main Language: ENGLISH			
Part II :Additional Language:			
Part III :Optional Subjects			
1.			
2.			
3.			
4.			
5.			
6.			
<b>TOTAL</b>			

**Note:**

- Please read the prospectus carefully before filling application form. Complete the Application Form in BLOCK CAPITAL LETTERS only in candidates own handwriting & do not leave any column blank.
- . Visit the website regularly for updates.
- Please enclose the **SELF-ATTESTED PHOTOCOPIES OF ALL RELEVANT DOCUMENTS** along with the completed application, such as **SSLC Certificate & Mark-list, Plus Two Certificate & Mark-list, Community/Cast Certificate from Revenue Authorities (if applicable)**. **Do not attach any original documents with the application and submit in a envelop**
- **Candidates with above 80% marks in the bioscience will be considered and admission will be strictly on the basis of merit. Since no hostel for boys female candidates will be preferred**
- The application shall reach the office on or before 30.06.2026 before 4.00 pm. Incomplete and delayed applications will be rejected. Those submitting the application directly shall deposit them in the box specified and placed in the front of the Office of Senior Superintendent at the ground floor of the administration building (Gate-1) of Jubilee Mission Medical College.
- **Please note that preference is given to the candidates with Bio Science. Only in the absence of candidates with science, non-science candidates are considered.**

**JOINT DECLARATION OF THE APPLICANT & PARENT**

We hereby sincerely and solemnly affirm that, we have read the prospectus and understood the rules and code of conduct of the School of Nursing and promise to follow the same. If we contravene any of the rules and regulations we are aware that the student will be liable for disciplinary action that the management of Jubilee Mission School of Nursing may consider necessary and appropriate.

Moreover, we do hereby declare that all the information furnished above are true and correct to our knowledge and belief, and we will obey the rules and regulations of the institution if admitted and shall submit all certificates and documents in original at the time of admission, failing which my admission will be liable for cancellation. We promise to pay all the fees as prescribed in prospectus from time to time. We also promise jointly that the applicant will not indulge in any of the act connected with ragging. We are also fully aware that the use of mobile phones is fully banned in the institution.

We further declare that the admission to the institution will be subject to the final decision of the management and registration by Kerala Nurses and Midwives Council.

Name & Signature of Candidate

Name & Signature of Parent

FOR OFFICE USE ONLY

Verified certificates on: .....

Name & Signature of verifying Official

Forwarded information for interview on: .....

Admission granted / Not granted

If admitted, Register No. & Date of Admission: