



BIHAR STUDENT CREDIT CARD SCHEME VERIFICATION REPORT

Date of Report: _____

APPROVED

REJECTED

1 Registration ID	7118214			
2 Received for Verification on (Date)	19-12-2024			
3 Name of the Applicant	SUBHAM KUMAR			
4 Father's Name	RAGHUBANSH MANDAL			
5 Name of the Institute In full	MAA SAVITRI INSTITUTE OF NURSING AND PARAMEDICAL SCIENCES AND HOSPITAL			
6 Course Applied for	B.Sc. (Nursing)			
7 Name of the Competent Authority recognizing the Course *	BNRC/GOVT OF BIHAR/B.U.H.S PATNA			
8 Roll No.(If available)/Admission Offer No.	17			
9 Name of the University in full	Bihar Nurses Registration Council, Patna or Bihar University of Health Sciences			
10 University/Institute Recognized by (Name of Regulating Agency) *	BNRC/GOVT OF BIHAR/B.U.H.S PATNA			
11 Institute Affiliated since (Date) *	2024			
12 Validity of Affiliation up to (Date) *	2028			
13 Certificate no. Of Affiliation Provided by the Institute *	6144/2024-1574, Date:- 02/12/2024			
14 Full Address & Contact details (Landline/Mobile/Email) of the Institute *	msnussingcollegebhagalpur@gmail.com			
15 Name/Designation/Contact Details of Contact Person of the Institute *	Ranjan Kumar Singh			
16 State and District of the Institute	Bihar Bhagalpur			
17 Category of City In which Institute is situated (A/B/C)	C			
18 Session (YYYY to YYYY)	2024 to 2028			
19 Course Start Date	Course End Date <i>October</i> December/2024 <i>October</i> December/2028			
20 Present Year/Semester of the Applicant *	First year			
21 Fees Charged (Year wise/Semester wise) *	year wise			
22 Expected Payment Date of the Fees to the Institute *	2025			
23 Whether the applicant resides/or intends to reside in the institute's Hostel*	yes			
24 Candidate Admitted in the Institute via	Management Quota <input type="checkbox"/> Entrance Exam <input checked="" type="checkbox"/> or other medium <input type="checkbox"/>			
Bank Account Details of the Institute for receiving Fees				
Type of Fees	Name of Bank Account Holder *	Account No. *	IFSC Code*	Bank Name & Branch *
Tuition fees	MAA SAVITRI INST-	50200087942	HDFC0002895	HDFC BANK SABOUR
Hostel fees	ITUTE OF NURSING	982		BHAGALPUR
Mess fees	AND PSH			
Any other				

26 **Whether Fees required by the Institute through DD, Furnish details**
 Note :The above serial no – 25 is mandatory, in case the institute requires different type of fees namely Tuition Fees, Hostel Fees, Mess Fees, etc. in more than one account.If the institute requires all types of fees namely Tuition Fees, Hostel Fees, Mess Fees etc. in only one account, then only single account details of the institute is to be furnished.

Signature of the Authorized Contact Person of the Institute. R Singh

CERTIFICATE OF TPVA

I have verified the above mentioned particulars with respect to the applicant and on the basis of this verification report the applicant's case for sanction of Education Loan by BSEFCL under Bihar Student Credit Card Scheme is **RECOMMENDED/NOT RECOMMENDED** (Reasons therefor)
 Remarks, if any -

CHAIRMAN
 PARAMEDICAL SCIENCES AND HOSPITAL
 AD:-BABU MODE, SABOUR, PO-BHAGALPUR,
 DIST-BHAGALPUR, PIN-813210 (BIHAR)

Signature of the verifying TPVA Representative