



# BIHAR STUDENT CREDIT CARD SCHEME VERIFICATION REPORT

Date of Report:

APPROVED ☒

REJECTED ☐

1	Registration ID	7119889		
2	Received for Verification on (Date)	23/12/2024		
3	Name of the Applicant	NEHA KUMARI		
4	Father's Name	RAJNARAYAN SINGH		
5	Name of the Institute In full	BEST NURSING INSTITUTE		
6	Course Applied for	B.Sc. (Nursing)		
7	Name of the Competent Authority recognizing the Course *	BIHAR NURSES REGISTRATION COUNCIL		
8	Roll No.(If available)/Admission Offer No.	BEST/N-02/BSCN/2428		
9	Name of the University in full	Bihar Nurses Registration Council Patna, Bihar University of Health Sciences, Patna		
10	University/Institute Recognized by (Name of Regulating Agency) *	BNRC/BIHAR UNIVERSITY OF HEALTH SCIENCES, PATNA		
11	Institute Affiliated since (Date) *	31-10-2023		
12	Validity of Affiliation up to (Date) *	OCT - 2027		
13	Certificate no. Of Affiliation Provided by the Institute *	674/BNRC/2021/2767		
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	GOLAMBAR NEAR BABA DHARM KANTA (BXR)		
15	Name/Designation/Contact Details of Contact Person of the Institute *	LAKSHMIAN TIWARI (DIRECTOR) 8210359221		
16	State and District of the Institute	Bihar Buxar		
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	October/2024		
20	Course End Date	October/2028		
21	Present Year/Semester of the Applicant *	1 <sup>ST</sup> YEAR		
22	Fees Charged (Year wise/Semester wise) *	SEMESTERWISE		
23	Expected Payment Date of the Fees to the Institute *	DEC - 2024		
24	Whether the applicant resides/or intends to reside in the institute's Hostel *	NO		
25	Candidate Admitted in the Institute via	Management Quota <input type="checkbox"/> Entrance Exam <input type="checkbox"/> or other medium <input checked="" type="checkbox"/>		
26	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	BEST NURSING	6390010100	UBIN0563901	UNION BANK OF INDIA
Hostel fees	INSTITUTE	50382	"	(BXR)
Mess fees	"	"	"	"
Any other	"	"	"	"
27	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.

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 (Persons therefor)

Remarks, if any -

DIRECTOR  
BEST NURSING INSTITUTE  
BUXAR

Signature of the verifying TPVA Representative