



BIHAR STUDENT CREDIT CARD SCHEME

VERIFICATION REPORT

Date of Report: _____

APPROVED

REJECTED

1	Registration ID	7094697
2	Received for Verification on (Date)	20-12-2024
3	Name of the Applicant	KRITI SWARAJ
4	Father's Name	VINDHYACHAL SAH
5	Name of the Institute in full	ASHOKA NURSING & PARAMEDICAL COLLEGE, NALANDA
6	Course Applied for	B.Sc. (Nursing)
7	Name of the Competent Authority recognizing the Course *	UNIVL. OF BIHAR, BNRC, BUHS, PATNA
8	Roll No. (If available)/Admission Offer No.	32
9	Name of the University in full	Aryabhatta Knowledge University, Patna, Bihar University of Health Sciences, Patna
10	University/Institute Recognized by (Name of Regulating Agency) *	UNIVL. OF BIHAR, BNRC, BUHS, PATNA
11	Institute Affiliated since (Date) *	2019
12	Validity of Affiliation up to (Date) *	2024-25
13	Certificate no. Of Affiliation Provided by the Institute *	1469 - 30-10-2024
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	ompc85@gmail.com
15	Name/Designation/Contact Details of Contact Person of the Institute *	9308819517, RANJEET KUMAR
16	State and District of the Institute	Bihar Nalanda
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	November/2024
	Course End Date	November/2028
20	Present Year/Semester of the Applicant *	1ST YEAR
21	Fees Charged (Year wise/Semester wise) *	YEAR WISE
22	Expected Payment Date of the Fees to the Institute *	JUNE
23	Whether the applicant resides/or intends to reside in the institute's Hostel*	NO
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	ASHOKA NURSING &	5797201100	BKID0005	BANK OF INDIA
Hostel fees	PARAMEDICAL	00073	797	BARRVA, PATNA
Mess fees	COLLEGE			
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.

PRINCIPAL

Ashoka Nursing & Paramedical College
Lachchubigha, Nagarnausa (Nalanda)

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 -

Signature of the verifying TPVA Representative