



BIHAR STUDENT CREDIT CARD SCHEME VERIFICATION REPORT

Date of Report: _____

APPROVED

REJECTED

1	Registration ID	7098791			
2	Received for Verification on (Date)	28-12-2024			
3	Name of the Applicant	NIKITA KUMARI			
4	Father's Name	SANJAY KUMAR			
5	Name of the Institute in full	SHRI BHAGWAT PRASAD SINGH MEMORIAL COLLEGE OF NURSING			
6	Course Applied for	B.Sc. (Nursing)			
7	Name of the Competent Authority recognizing the Course *	Health Dept. of Bihar			
8	Roll No.(If available)/Admission Offer No.	68			
9	Name of the University In full	ARYABHATTA KNOWLEDGE UNIVERSITY, PATNA OR Bihar Nurses Registration Council Patna, Bihar University of Health Sciences, Patna			
10	University/Institute Recognized by (Name of Regulating Agency) *	BUHS, Patna			
11	Institute Affiliated since (Date) *	08-03-2019			
12	Validity of Affiliation up to (Date) *	29-09-2027			
13	Certificate no. Of Affiliation Provided by the Institute *	878/BPRC/2022/4120, 6144/2024-1569/BUHS			
14	Full Address & Contact details (Landline/Mobile/Email) of the Institute *	7604820900, 887861collegesnursing@gmail.com			
15	Name/Designation/Contact Details of Contact Person of the Institute *	ABHAY KUMAR			
16	State and District of the Institute	Bihar		Aurangabad	
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		October/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 *	Jan 2025			
23	Whether the applicant resides/or intends to reside in the Institute's Hostel*	No/not intends to reside			
24	Candidate Admitted in the Institute via	Management Quota <input type="checkbox"/>	Entrance Exam <input checked="" type="checkbox"/>	or other medium <input type="checkbox"/>	
25	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	Shri Bhagwat Prasad Singh Memorial	31530021	PUNB031	PNB, Sheoganj
	Hostel fees	College of Nursing	00004047	5300	Aurangabad
	Mess fees				
	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.

(Signature)

CERTIFICATE OF TPVA

Director

I have verified the above mentioned particulars with respect to the applicant and on the basis of this report the above mentioned details of the applicant for sanction of Education Loan by BSEFCL under Bihar Student Credit Card Scheme is RECOMMENDED (REASON: _____) (Reasons hereon)

Deo More G.T. Road Aurangabad (Bihar)

Signature of the verifying TPVA Representative