

 <div>बिहार सरकार शिक्षा विभाग</div>	BIHAR STUDENT CREDIT CARD SCHEME VERIFICATION REPORT			
Date of Report : 2024-12-31				
Application Status : <b>Approved</b>				
SNO	PARTICULARS		TPVA REPORT	
1	Registration ID		CM7RBSCC122024007145063	
2	Received for Verification on		2024-12-29	
3	Name of Applicant		KUMARI PRIYA	
4	Fathers Name		RITLAL DAS	
5	Name of Institute in Full		KRISHNA INSTITUTE OF PARAMEDICAL SCIENCES	
6	Course Applied for		BACHELOR OF PHYSIOTHERAPY	
7	Name of the Competent Authority Recognizing the Course for the Period / Session mentioned in the Admission Letter		AKU BIHAR UNIVERSITY OF HEALTH SCIENCE	
8	Roll No. (If Available) / Admission Offer No.		05	
9	Name of University in full		ARYABHATTA KNOWLEDGE UNIVERSITY BIHAR UNIVERSITY OF HEALTH SCIENCES PATNA	
10	University / Institute Recognized by Name of Regulating Agency eg. AICTE / UGC / Central Govt / State Govt / Others		BIHAR UNIVERSITY OF HEALTH SCIENCE	
11	Institute Affiliated since		2024-12-02	
12	Validity of Affiliation upto		2028-03-31	
13	Certificate No of Affiliation Provided by the Institute		6144/2024-1627	
14	Full Address and Contact Details (Landline / Mobile / Email) of the Institute		KRISHNA INSTITUTE OF PARAMEDICAL SCIENCES GROUP@SKMGI.COM	
15	Name / Designation / Contact Details of Contact Person of the Institute		S K MANDAL CHAIRMAN	
16	District of Institute		PURNIA	
17	Category of City in which Institute is situated		Catrgory C	
18	Duration / Session of Course		4/2024 - 2028	
19	Course Start Date	Course End Date	2024-07-01	2028-03-31
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		2025-01-31	
23	Whether the Applicant resides or Intend to reside in the Institutes Hostel		YES	
24	Candidate Admitted to Institute via		ENTRANCE EXAM	
Serial No 25 is mandatory, in the case Institute requires different types of fees namely Tuition Fees, Hostel Fees, Mess Fees, etc. in more than one account. If the Institute requires all type of fees namely Tuition Fees, hostel Fees, Mess Fees, etc. in only one account, then only one single account details of the Institute is to be furnished.				
25	Bank Account Details of Institute for receiving Fees			
Type of Fees	Name of Bank Account Holder		Account Number	IFSC Code Bank Name & Branch
Tuition Fees	KRISHNA INSTITUTE OF PARAMEDICAL SCIENCES		922020034983446	UTIB0004209 AXIS BANK, PATEL NAGAR
Hostel Fees				
Mess Fees				
Other Fees				
26	Whether Fees required by the Institute through DD, Furnish details			
27	Location		25.794677, 87.500627	

CERTIFICATE OF TPVA

I have verified the above mentioned particulars to the best of my knowledge.The information provided by the institution and on the basis of this verification report, We are submitting the report to Depart of Education, Bihar.

Remarks, If Any **APPROVED BY MTCPL**  
SIGNATURE OF THE VERIFYING TPVA REPRESENTATIVE

NAME OF VERIFICATION OFFICER  
Pintoo Kumar

  
Verified by  
TPVA (Bihar)-MTCPL  
BSCC