

# NORMS FOR AFFILIATION

## National Institute of Health Science & Research



Aman Nagar, Behind Green Land School, Near Jalandhar Bye-Pass,  
Ludhiana - 141008 (Punjab) India

**Phone :** 0161-6410570, +91-161-3222434

**Mobile :** 93168-50388, 92176-03232

**Regd. Office :**

K-249, Mahipalpur Extn.,

New Delhi - 110037.

Mobile : +91-92167-50388, +91-92161-50388

Web : [www.nihsr.com](http://www.nihsr.com) // Email : [nihsr\\_2001@yahoo.com](mailto:nihsr_2001@yahoo.com)

Rs.500/-



# National Institute of Health Science & Research

## *Affiliation Form*

NAME OF INSTITUTE \_\_\_\_\_

ADDRESS : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TA \_\_\_\_\_ DI \_\_\_\_\_ PIN \_\_\_\_\_

HEAD OF INSTITUTE

1. \_\_\_\_\_

2. \_\_\_\_\_

CONTACT NO.

1. \_\_\_\_\_

2. \_\_\_\_\_

# National Institute of Health Science & Research



**Regd. Office :** K-249, Mahipalpur Extn., New Delhi - 110037.

Mobile : +91-92167-50388, +91-92161-50388

**Head Office :** Aman Nagar, Behind Green Land School,  
Near Jalandhar Bye-Pass, Ludhiana - 141008 (Punjab) India

**Phone :** 0161-6410570, +91-161-3222434 **Mobile :** 93168-50388, 92176-03232

**Web :** www.nihsr.com // **Email :** nihsr\_2001@yahoo.com

## AFFILIATION FORM FOR AFFILIATION

### 1. INFORMATION ABOUT INSTITUTE

Application No.	Date
<b>Name of Courses</b>	
<b>Application for Courses</b>	
<b>Name of Institute</b>	
<b>Postal Address with PIN CODE</b>	
<b>Registration Address with PIN CODE</b>	
<b>Phone / Fax</b>	
<b>Email</b>	
<b>Year of Establishment</b>	
<b>Status of Institute</b>	

## 2. INFORMATION ABOUT THE CHIEF EXECUTIVE / PRINCIPAL / DIRECTOR

<b>Name</b>		PHOTO
<b>Application No.</b>		
<b>Designation / Position</b>		
<b>Postal Address</b>		
<b>Phone</b>		
<b>Email</b>		
<b>Date of Birth</b>		
<b>Education Qualification</b>		
<b>Professional Experience</b>		
<b>Signature of Head</b>	<b>Seal</b>	

## 3. INFRASTRUCTURE FACILITIES

Particular	No. of rooms	Seating Capacity	Total Area
Staff Rooms			
Class Rooms			
Laboratories			
Library			
Reception			
Toilets			
Extra Rooms			
Any other facilities			

(Where Ever Necessary Relevant Details/Documents Must Be Enclosed)

#### 4. LOCATION OF INSTITUTE

Enclosed Location Through Google Map



## 5. HOW TO REACH FROM LUDHIANA

Enclosed Location By Road Through Google Map





**6. COMPUTER SPECIFICATION**

No.	Computer Type Configuration	No. of Terminals	Year of Purchase	Cost	Software & Other Facilities
					

## 7. INFORMATION ABOUT FACULTY

No.	Name	Designation	Qualification	Experience	Date of Appointment	Responsibilities	Status Full / Part Time





### 8. INFORMATION ABOUT SUPPORTING

No.	Name	Designation	Qualification	Experience	Date of Appointment	Responsibilities	Status Full / Part Time
							

## 9. INFORMATION ABOUT LAB FACULTY

No.	Name	Designation	Qualification	Experience	Date of Appointment	Responsibilities	Status Full / Part Time



## 10. INFORMATION ABOUT LIBRARY

Total Cost Invested On Library	
No. of Tax / Subject Books	
No. of References Books	
No. of Periodicals	
No. of Journals	
No. CD's	
No. of Video Films	
Other Specify	

## 11. FINANCIAL DETAIL

<b>1. Non Recurring Investment Made by Institute</b>	
Infrastructure	
Laboratory	
Faculty	
Library	
Other	
<b>2. Estimated Recurring / Nonrecurring Expenditure</b>	
<b>3. Bank Balance as on Date of Submission of Application</b>	

## 12. INFORMATION ABOUT TRUST / SOCIETY

<b>Name of Trust / Society (Attached Registration Certificate)</b>	
<b>Year of Registration</b>	
<b>Name of President of the Trust / Society</b>	
<b>Address</b>	
<b>Contact No.</b>	

## **DOCUMENT DETAILS**

### **DOCUMENTS ENCLOSED**

- 9 Registration Certificate
- 9 List of Management Members with Details
- 9 Photographs of Institute
- 9 Rented / Lease Agreements
- 9 Detailed List of Equipment of All Laboratory
- 9 Detailed List of Publication of Library
- 9 Audit Report of Last Year
- 9 Bank Balance as on Date of Submission of the Application
- 9 Copy of Registration of Resolution
- 9 Copy of Building Map

### **DOCUMENTS ENCLOSED FOR TRUST**

- 9 Registration Certificate
- 9 List of Trust / Society Members
- 9 Copy of Registration of Resolution
- 9 Layout Plan

### **AFFILIATION FEES**

- 9 Affiliation fees are in cash, cheque or demand draft mode
- 9 It is non-refundable.

## AGREEMENTS

**This agreement attested by notary on Rs. 100/- Stamp Paper**

1. I \_\_\_\_\_ S/o Sh. \_\_\_\_\_  
R/o \_\_\_\_\_  
have gone through all rules and regulations of National Institute of Health Science & Research, Ludhiana.
2. My Institute and I agree to follow all rules and regulation mentioned in prospects of National Institute of Health Science & Research, Ludhiana.
3. My Institute and I agree to follow amendments done by Institute.
4. My Institute and I will not disobey; if we do so then National Institute of Health Science & Research, Ludhiana will have right to cancel our affiliation.
5. My Institute and I have been told that all legal matters will be solved in Ludhiana Court only.
6. My Institute and I have been told that all fees are non-refundable & non adjustable.

**Date :**

**Place :**

**Signature**  
**President / Head of Institute**

PHOTO





# National Institute of Health Science & Research

Aman Nagar, Behind Green Land School, Near Jalandhar Bye-Pass,  
Ludhiana - 141008 (Punjab) India

Phone : 0161-6410570, +91-161-3222434

Mobile : 93168-50388, 92176-03232

Regd. Office : K-249, Mahipalpur Extn., New Delhi - 110037.

Mobile : +91-92167-50388, +91-92161-50388

Web : [www.nihsr.com](http://www.nihsr.com) // Email : [nihsr\\_2001@yahoo.com](mailto:nihsr_2001@yahoo.com)