



Government of Maharashtra

GOVERNMENT COLLEGE OF NURSING

**Government Medical College and Hospital,
Alibag, Raigad- 402201 Maharashtra.**

Information Brochure for Admission of B.Sc. Nursing Course A.Y. 2026-2027



Contact- 02141-299214 / 9271559573

(10:00 AM to 05:00 PM only)

DON'T CALL PRINCIPAL / NODAL OFFICER ON THEIR PERSONAL NUMBER

GOVERNMENT COLLEGE OF NURSING

Government Medical College and Hospital, Alibag.

NOTIFICATION

(For MH- Nursing–CET 2026 Admissions)

All students selected through MH-Nursing CET 2026 and allotted a seat at Government College of Nursing, Government Medical College and Hospital, Alibag, Raigad – 402201, must follow the instructions below and report with all documents required for admission.

- 1. Download and print this brochure. READ ALL DETAILS CAREFULLY.**
2. Print and fill in 2 copies of the Application Form and Candidate Information Form.
3. Bring all original certificates and documents, along with 2 sets of self-attested photocopies, as listed in the Document Holding Certificate checklist.
4. Bring 6 passport-size photographs.
5. Print and fill in 3 copies of the Original Documents Holding Certificate.
6. Print and fill 3 copies of Admission Office Order.
7. Arrange all documents in the sequence given in the checklist.
8. Bring the Medical Fitness Certificate in the prescribed format only (Annexure H).
9. Refer ***MH- Nursing –CET 2026 Brochure*** for as per prescribed formats for Certificates / Documents / Undertakings.
10. Scan each **original certificate/document** individually and save it in PDF format (up to 500 KB per file). Rename and number each file according to the checklist. Do not use a mobile scanner.
e.g., 6.Nationality-XYZ (student's name)
11. Create a folder on the pen drive and name it with the student's name. Save all scanned documents in this folder, numbered according to the checklist.
12. Pay the prescribed fees by Demand Draft (DD) only (refer to the fee structure).
Check the DD carefully for spelling or amount errors; an incorrect DD will not be accepted. Cash and cheques will NOT be accepted.
- 13. Write the student's name and phone number on the back of each DD.**
- 14. Admission is subject to verification and approval. Joining letters will not be issued urgently; the office may require 2–3 working days to complete the process.**
15. Read the admission process details in the brochure, FAQs and other notifications on

the official CET Cell website. Students should check the official websites for queries relating to the admission process.

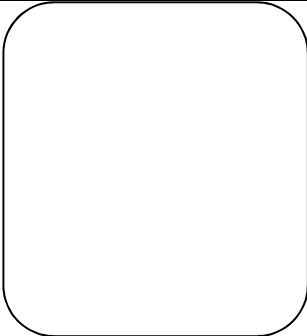
16. **Do NOT** edit or modify any prescribed format. All forms must be completed by the student in their own handwriting.
17. Candidates must report between **10:00 a.m. and 5:00 p.m.**
18. Any additional letters or undertakings, if required and permitted under the applicable rules, will be obtained at the time of admission within the rules thereof.
19. **Submit all documents and the pen drive in a simple button-file folder, as shown below:**



Sd/-
PRINCIPAL
Government College of Nursing
Government Medical College & Hospital,
Alibag- Raigad – 402 201 (MS)

APPLICATION FORM

(To be filled by candidate)

Rank No.....	Name of Candidate :- (As per 12 th mark sheet)
Marks :-.....	Address:-
DOB:-	StudentMob.no.....
Catergory :-.....	Father mob no.....
Admitted Category :-.....	Mother mob no.....
	

**To,
The Principal ,
Government College Of Nursing,
GMCH, Alibag**

**Sub :- Joining in B. Sc. Nursing course A.Y. 2026-27
at Government College Of Nursing, Alibag**

Ref :- Selection Letter dated
(Print out Attached)

Respected Sir ,

I, the under signed Shri/Kum,(Full Name in Capital).....
have been selected for B. Sc. Nursing Course in Government College of Nursing, Alibag as per the
selection letter of State List.

Kindly join me in your College for B.Sc. Nursing Programme for Academic Year 2026-27.
Thanking You.

Yours Faithfully,

Signature of Candidate

(Name-.....)

GOVERNMENT COLLEGE OF NURSING

Government Medical College & Hospital, Alibag, Raigad.

B.SC.NURSING ADMISSION FOR THE YEAR 2026-27.

STUDENT INFORMATION

01	Name of the Student as mentioned on HSC Mark-sheet (in Capital)	
	Guardian/ Father's Full Name	
	Name of Mother	
	Full Name of the Candidate in Devnagri (Marathi/Hindi)	
02	Residential Address with PIN Code	
	Mobile No. Of Student	
	Mobile No. Of Student	
03	E-mail Address of Student	
	E-mail Address of Parent	
04	a) Date of Birth	
	b) Place of Birth	
05	Aadhaar No.	
06	Gender (Male/Female)	
07	Marital Status (Married / Unmarried)	
08	a) Category	
	b) Caste	
	c) Sub-Caste	
	Category of Admission	
09	Non Creamy layer Certificate Valid up to March 2027	Yes/No/Not Applicable

10	Domicile State (belongs to which state)	
11	Allotment Date	
12	Admission Date at College	
13	Academic Record	
	S.S.C. Year of Passing :-	
	Name of the HSC/12th Board	
	Marks Obtained in H.S.C. (10+2)	
	(E) English : Marks Obtained	/100
	(P) Physics : Marks Obtained	/100
	(C) Chemistry : Marks Obtained	/100
	(B) Biology : Marks Obtained	/100
	Total Marks (phys+Chem+Bio)	/300 (P+C+B)
	Total Marks (phys+Chem+Bio) PCB %	%
14	MH-BSc Nursing CET-2026 Roll No	
	MH-BSc Nursing CET-2026 Percentile	
	MH-BSc Nursing CET-2026 SML NO	
15	BLOOD GROUP	
16	MARK OF IDENTIFICATION (TWO)	1)
		2)
17	Guardian /Father's Occupation	
18	*Willingness about organ donation after Accidental Death.	Yes / No

***as per Maharashtra University of Health Sciences eligibility form**

Date :- / /2026

Place :- Alibag

Signature of Candidate



महाराष्ट्र शासन

शासकीय परिचर्या महाविद्यालय



शासकीय वैद्यकीय महाविद्यालय व रुग्णालय, अलिबाग, रायगड - ४०२२०१.

Government College of Nursing, Government Medical College & Hospital, Alibag, Raigad- 402201.

E-mail - gncalibag@gmail.com

www.gmchalibag.in

Tel.- 02141 299214

No.GNCA/AY2026-27/B.ScNsg/Originals/

/2026

Date: / /2026

Original Document Holding Certificate

This is to certify that Shri/ Kum. _____ admitted to the B.Sc. Nursing course in this college on / /2026 for the academic year 2026–2027. His/her following **marked Original Certificates/Documents** are retained in this college.

No	Original Documents list of Student				Yes/No
01	Photo Identity Proof (Aadhaar Card)				
02	Voter ID				
03	Nationality and /Valid Indian Passport				
04	Domicile Certificate				
05	S.S.C. Passing certificate (Date of Birth Proof)				
06	H.S.C Mark sheet				
07	HSC / 12th Passing Certificate				
08	Admit Card of MH- Nursing–CET 2026				
09	MH- Nursing –CET 2026 Mark sheet				
10	Cast certificate				
11	Cast Validity certificate				
12	Non-creamy layer certificate (Annexure-G) Valid up to 31/03/ 2027 (For VJ-A,NT-B NT-C NT-D, OBC, and SBC)				
13	College Leaving Certificate (LC/TC)				
14	Physical Fitness Certificate (in given format Annexure-H)				
15	Migration Certificate				
16	Educational Gap certificate				
17	Defense Certificate (Annexure-E) (Certificate from Zillah Sainik Board Domicile Certificate of Parent for D-1 & D-2) Transfer Order of Parent for D-3				
18	Person with Disability Certificate (PWD) (Annexure-F)				
19	EWS Certificate (Annexure-M)				
20	SEBC Certificate (Annexure-D)				
21	Hilly Area Certificate, Domicile Cert. of Parent, School Cert.				
22	Minority Certificate (Jain/ Muslim/ Christian/ Gujarati / Sindhi/ Hindi Linguistic)				
23	Orphan (if applicable)				
24	Undertaking Form / Joint Undertaking				
25	Income Certificate				
26	Other required Certificate / Document				
	Demand Draft No.	Name of Bank	Amount	Date	
1			Rs. 1500/-	/ /2026	
2				/ /2026	
3			Rs. 3500/-	/ /2026	

Nodal Officer

Principal

GOVERNMENT COLLEGE OF NURSING

Government Medical College & Hospital, Alibag, Raigad.

FEE STRUCTURE

The fees for B.Sc. Nursing Course at Government Nursing Colleges, GMCH, Alibag are as per GR. No. AMC-1007/628/CR.148/07/Edu-02 Mantralaya Dated 1st March, 2011 (DMER-11011/9/2022-CETIT, dated 06/06/2023 & subject to revision by the Govt. / appropriate authorities time to time):

A) Tuition Fees for Academic Year 2026-27 is as under: -

Sr. No.	Fee Description	Fee per Annum (in Rs.)	Development Fee per annum Rs.
1)	Tuition fee	25,400/-	-

B) Apart from above stated Tuition fees, the other facilities provided by the institution shall be charged as under:

Sr. No	Fee Description	Fee per Annum (in Rs.)	Remark
1	Admission Fee	1,500/-	at the time of admission
2	Gymkhana Fee	500/-	per annum
3	Hostel Fee	4,000/-	per annum
4	Library Fee	2,000/-	Deposit once at the time of admission
		1,000/-	per annum

Note: Demand draft should be drawn from nationalised bank or commercial bank in favour of **“Principal, Government College of Nursing, Alibag”** payable at **Alibag**.

DETAILS OF FEES TO BE PAID BY FIRST YEAR BSc. NURSING STUDENTS AT THE TIME OF ADMISSION FOR THE A.Y. 2026 – 2027

No.	Fees	OPEN Category	Reserve Category (SC/ST/ VJ/NT)	Reserve Category (OBC/SEBC/EWS) (for Maharashtra students only) (Those Candidate who are eligible for scholarship Scheme will be reimbursed Tuition Fees)		DD Amount	DD
				Male	Female		
1	Admission Fees	Rs.1500/-	Rs.1500/-	Rs.1500/-	Rs.1500/-	Rs.1500/-	DD1
2	Tuition Fees	Rs.25400/-	--	Rs.12700/-	--	As applied	DD2
3	Library Fees	Rs.1000/-	Rs.1000/-	Rs.1000/-	Rs.1000/-	Rs.3500/-	DD3
4	Library Deposit	Rs.2000/-	Rs.2000/-	Rs.2000/-	Rs.2000/-		
5	Gymkhana	Rs.500/-	Rs.500/-	Rs.500/-	Rs.500/-		

Sd/-

PRINCIPAL

Government College of Nursing

Government Medical College & Hospital,

Alibag- Raigad – 402 201 (MS)

Date: / /2026

To,

The Principal,
Government College of Nursing,
Alibag- Raigad

Subject: Regarding Non-Submission of Original Certificates.

Respected sir,

I have been selected for admission to the B.Sc. Nursing course for the academic year 2026–2027 at Government College of Nursing, Alibag–Raigad.

I have not brought the following original certificates: -

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____

I undertake to submit the above-mentioned certificates within 15 days from the date of admission. Failing this, my admission to the B.Sc. Nursing course will be cancelled. I therefore request provisional admission.

Thanking you.

Yours sincerely,

Place: Alibag–Raigad

Dated: / / 2026.

(_____)

UNDERTAKING
ANTI-RAGGING UNDERTAKING NEWLY ADMITTED STUDENTS

I, Mr./Ms. _____,
Son/Daughter of Mr./Mrs. _____,
resident of _____,

having been admitted to the **B.Sc. Nursing Programme** at Government College of Nursing, GMCH, Alibag (**Academic year 2026-27**), hereby solemnly declare and undertake as follows:

1. I have carefully read and fully understood the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, as amended from time to time, and the applicable directions of the Hon'ble Supreme Court of India and the Government of India.
2. I understand that ragging in any form is prohibited and constitutes a serious disciplinary offence. I am aware of the definition of ragging and the consequences of involvement in any such activity.
3. I hereby undertake that I shall not indulge in, participate in, abet, encourage, or propagate ragging in any form, either directly or indirectly, within or outside the college campus, hostel, hospital, clinical posting area, or any other place.
4. I shall not engage in any act that causes physical or psychological harm, humiliation, harassment, intimidation, or distress to any student, particularly a newly admitted or junior student.
5. I shall abide by all anti-ragging rules, regulations, instructions, and directions issued by the University Grants Commission, the competent authorities, the State Government, the affiliated university, and the College Administration.
6. I understand that if I am found guilty of ragging, I shall be liable to disciplinary action under the applicable UGC Regulations and other applicable laws, which may include suspension, cancellation of admission, expulsion from the institution or hostel, and other penalties as prescribed by law.
7. I hereby declare that I have not been expelled or debarred from admission to any educational institution on account of ragging, to the best of my knowledge and as applicable to my admission.
8. I undertake to report any incident of ragging to the Anti-Ragging Committee, the Principal, the Anti-Ragging Squad, or the appropriate authority without delay.
9. I understand that this undertaking is given voluntarily and that any false declaration or violation of this undertaking may invite action under the applicable rules and regulations.

DECLARATION

I hereby affirm that the information provided above is true and correct to the best of my knowledge and belief, and I undertake to comply with the applicable anti-ragging regulations throughout my period of study.

Name & Signature of Student

Name & Signature of Parent

Place: _____

Date: ____ / ____ / ____