



**Amala**  
COLLEGE OF NURSING  
ACCREDITED BY NAAC WITH A GRADE

# AMALA COLLEGE OF NURSING

## AQAR (2022-2023)



### CRITERION 4 – Infrastructure and Learning Resources

#### Key Indicator 4.2 – Clinical, Equipment and Laboratory Learning Resources

**Metric No. 4.2.4- Availability of infrastructure for community based learning**

**SUBMITTED TO**



**National Assessment and Accreditation Council**

**GOVERNMENT ORDER  
ON ALLOTMENT  
/ASSIGNMENT OF PHC TO  
THE INSTITUTION**

**DISTRICT MEDICAL OFFICE OF HEALTH, THRISSUR**

PIN - 680 001. PHONE: 0487- 2333242.

Email: [dmohtsr@gmail.com](mailto:dmohtsr@gmail.com)

No. L.Dis (D2) - 300/2022

DATED: 10-02-2022.

From

The District Medical Officer of Health,  
Thrissur.

To

The Principal,  
Amala College of Nursing,  
Amala Nagar, Thrissur.

Sir,

Sub:- **Practical Training - Permission - reg:-**

- Ref:-
1. G.O(Rt) No. 487/13 Dated 13-02-2013 of H&FW Dept., Thiruvananthapuram.
  2. Your Request No. B-027/2022/ACON Dated. 28-01-2022.
  3. Lr No. 20/2022/ FHC Elavally/ Dtd: 19-01-2021.

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Please refer the letters cited above. The IV<sup>th</sup> Year B.Sc Nursing I<sup>st</sup> Batch & II<sup>nd</sup> Batch and II<sup>nd</sup> Year B.Sc Nursing 50 Students of your institution are permitted to undergo Practical Training at Family Health Centre, Elavally as shown below.

Sl. No.	Batch	No.of Students	Training Period	Institution
1	IV <sup>th</sup> Year B.Sc Nursing (I <sup>st</sup> Batch)	25	16-05-2022 to 16-07-2022	Family Health Centre, Elavally.
2	IV <sup>th</sup> Year B.Sc Nursing (II <sup>nd</sup> Batch)	25	18-07-2022 to 17-09-2022	
3	II <sup>nd</sup> Year B.Sc Nursing	50	01-10-2022 to 31-10-2022	



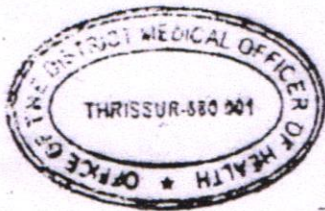
Prof. Dr. RAJEE REGHUNATH  
PRINCIPAL  
AMALA COLLEGE OF NURSING  
AMALA NAGAR PO., THRISSUR-680 555



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Provided they fulfill the conditions that each should remit an amount of Rs. 100/- (Rupees One Hundred only) as admission fee in Government in the Head of Account 0210-03-105-98 and Rs. 1000/- (Rupees One Thousand Only) at concerned institution.

The amount should be remitted in cash in the Hospital Development Committee account of the institution where training is required. The Original Chalan of remitting admission fee should be produced to Head of Institution.



Yours faithfully,

*[Signature]*  
DISTRICT MEDICAL OFFICER OF HEALTH,  
THRISUR.

Copy to:-

1. The Medical Officer incharge,  
Family Health Centre, Elavally.  
(Please see that the above condition is invariably be observed by the candidates before admitting them for the training. The list of students should be obtained and filed there).
2. File/SF.

SP.10/02.

*[Handwritten notes]*  
HBL  
Development Centre,  
Pte. Elavally  
Canara Bank, Ponnally