



**GOVERNMENT OF MAHARASHTRA
STATE COMMON ENTRANCE TEST CELL, MAHARASHTRA STATE, MUMBAI**

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Tele. No. - 022-22016157/53/59 E-Mail cetcell@mahacet.org

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Admission for State Quota Seats (85%)

**Application Form for Institutional Level Round at Government/ Private Unaided/
Minority Colleges for B.Sc.Nursing Course Academic Year 2026-27**

Name of College/Institute		:			
Application Date & Time		:			
1.	Name of the Candidate	:	Surname	First Name	Middle Name
2.	Date of Birth	:	DD / MM / YYYY	Gender	
3.	CAP Application No	:			
4.	MH Nursing CET 2026 Percentile	:	Percentile	SML No.	
5.	HSC PCB marks	:	/300		
6.	Category of the Candidate	:			
7.	Minority Status (Yes/No)	:	Linguistic : 1) Gujarati Religious : 1) Sindhi 2) Muslim 3) Christian		
8.	Mobile No. of the Candidate	:			
9.	E-mail ID of the Candidate	:			
10.	Address for Correspondence	:			
11.	I am submitting Mandatory Xerox copies of all essential documents as per B.Sc.Nursing 2026 Information Brochure along with Application Form.	:	1) 2) 3) 4) 5) 6)	07) 08) 09) 10) 11) 12)	

☐ I have All Original Documents & College Fees as per Information Brochure. I will submit All Original Document at the time of Admission.

Date : / /2026

(Signature of the Candidate)

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Acknowledgement

Received Application Form for Institutional Level Round (85% State Quota Only) for A.Y. – 2026-27

from Name _____ CET Application No. _____

Date : / /2026

(Signature of the Concern Officer with Stamp)