NGEC Computer and Vocational Training Institute

AFFILIATION FORM

Date ………………………….   **Day**………………………………

Application for Courses

…………………………………………………………..…………………………

1- INFORMATION ABOUT THE INSTITUTION

Name of the Institution:
(Use Block Letter only)

Postal Address:
(With Pin code, District
&State)
(Use Block Letter Only):

Registered Address
(With Pin code, District &
State)
(Use Block Letter Only):
Phone/Fax/E-mail/Telex:
(With Appropriate
Codes)

Year of Establishment:

Status of Institution:
(Relevant Documents to be attached)

Private Institution:
(Trust/Regd. Societies/Others to be
specified)

Phone/Fax/E-mail/Telex :
(With Appropriate Code)

Physical infrastructure

1. **Status of building**
(Owned, rented, leased)

2. **Total area   of   sq.ft**
building
3. **Covered area   sq.ft**

4. **Class rooms   no of rooms**

5. **Laboratories**

6. **Library/ reading room**

7. **Demonstration room**

Financial base

Bank /branch
name…………………………………………..

Account title
…………………………………………Account
no………………………………………………….

Last
balance…………………………Date of last external…..
audit…………………………………

Documents to be attached
1. Registration certificate of trust deed/NGO/Section 8 company/Society Documents
2. Hospital Association letter (If hospital is own then not required)
3. List of available equipment and chemicals.
4. Copies of academic qualification of all faculty members
5. Latest bank statement
6. Legal agreement on the prescribed format
7. Bank draft for inspection fee and affiliation fee
8. Membership of management committee(members / partners/ director / trusties)
9. Copy of Resolution
10. Head of department Id proof(Aadhar or Pan Card)