#### **REGD. BY GOVT. OF INDIA**

# SUNDARBAN RURAL COMPUTER LITERACY DRIVE & VOCATIONAL TRAINING CENTRE

(COMPLETE COMPUTER LITERACY MISSION OF INDIA)

## APPLICATION FOR ESTABLISHMENT OF SRCLD & VTC STUDY CENTRES

(ALL ENTRIES TO BE FILLED IN CAPITAL LETTERS ONLY)

CENTRE HEAD / DIRECTOR'S NAME			
COMPLETE ADDRESS OF THE PROPOSED	) SITE		
PANCHAYAT/ MUNICIPALITY		BLOCK	
DIST	STATE		
PIN CODEPH	/MORILE (STD CODE)		1
E-mail			
ESTABLISHMENT YEAR OF STUDY CENTE	RE, Since	AND	
TICK ON THE CLASS OF STUDY CENTRES	A CLASS	B CLASS	C CLASS
FILL LID THE DECLUDED STUDY CENTRES	IN THE COLUMN CIVEN BELOW		
FILL UP THE REQUIRED STUDY CENTRES	IN THE COLOIVIN GIVEN BELOW -		
CHOOSE <b>SRCLD &amp; VTC</b> COURSES: Technic	cal (Computer Software & Hardware	) / Vocational / All / Other	S. (See Page – 2)
Table A	. C. E	h-	
Total Space Available in Study Centre (I	n Sq. Feet)		
	NO OF ROOMS	AREA IN SO	Q. FEET
CENTRE HEAD/DIRECTOR'S OFFICE			
CLASS ROOMS			
	The A section is		
LAB ROOMS			
LIBRARY ROOMS (IF ANY)		1	
	SUNDARRAN RURAL COMPUT	ER LITERACY URINE	
LIBRARY ROOMS (IF ANY)	SUNDARRAN RORAL COMPUT COMPUTER LITERACY MIS	ER LITERACT DRIVE	

ESTIMATED COST OF THE TOTAL SETU	P
ESTIMATED COST OF THE TOTAL SETU	)

NAME OF FACULTIES & OFFICE STAFF (With Designation)	QUALIFICATION (Last Educational & Technical)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	G_

## **ENLIST COURSES NAME WITH COURSE CODE –**

(Maximum Ten Numbers of training Courses can be chooses a Centre. Please fill this Page with **Ten** course indicating their name and codes provided by your Centre/Institute/Organisation.)

SL.	COURSE NAME	COURSE CODE
NO.		
1.		
2.		
3.		
4.		
5.	JA 35(	
6.	CHROADDAN BODAL CONBUTED LITERA	PV holys
7.	COMPLETE COMPUTER LITERACY MISSION O	V 1.3 DC13c3
8.		
9.		
10.		

(P.T.O)

### **DECLARATION**

All the information given above are true to the best of my knowledge & nothing is concealed therein. I have read & understood the rules & regulation made by the "SRCLD & VTC" & accepts the same.

Place :	
	Signature with Seal
	HEAD/DIRECTOR OF THE STUDY CENTRE

If a Partnership Firm/Society/Trust/Organisation sign of other Member/Trusty/Partner with Designation.

SL.	NAME (CAPITAL LETTERS ONLY)	SIGNATURE	DESIGNATION
NO.			1.0
1.			
2.			
3.	-7111	111	P
4.			
5.		3	
6.			
7.	4 _ <		

N.B.: 1) Trade License/ Society / Firm / Company Registration Certificate / Trust Deed / Other Certificates of any Organization, Xerox copy Enclose with this form.

- 2) If you have a partnership firm enclose Xerox copy of Partnership Deed.
- 3) Enclose Xerox copy of identity proof issued by Centre Head/Director/Chairman/Secretary/President. If any Partnership Firm encloses Xerox copy of all partners identity proof.
- 4) If rented building enclose rent receipt copy of current month & no objection certificate from building lord. If you have own building enclose Xerox copy evidential document.
- 5) Enclose Xerox copy of Bio-Data & All Certificates of Faculty & Office Staff.
- 6) Enclose Photo copy of Building Design (Owner Hand Drawing) on a plain A4 paper with entrance, Gate, Reception, Office, Theory & Lab.
- 7) All Subject to be verified before affiliation.