

A Standalone Institution under the Department of Higher Education Ministry of Education, Government of India

AISHE (MHRD Code: S-21363)

#### For Membership / Application Refferal Centre Form

| DETAIL OF THE IN  | STITUTION / IND                                   | OUSTRY                    |
|---|---|---------------------------|
| Name of the Institute/Industry & Address  |   |                           |
| Website of Institute/Industry   |   |                           |
| Name of Registered Organization   |   |                           |
| Registered Office   | District  | State Pin Code            |
| Type of Registered Organization (Tick most appropriate ad enclose self attested the necessary details and proofs) | Trust Co-operative Soc Society Govt. Organization | ation Company/s25         |
| Year of Establishment   | Registration No.                                  | PAN N <mark>umb</mark> er |
|   |   |                           |
| Head of the Registered Organization   | Name  | Designation               |
| (Chairman/President/ Managing Director/ Secretary)  |   |                           |
| Email ID  | SEMENT INSTITUTE                                  |                           |
| Telephone / Mobile No.  | 10160   | FINDL                     |
| Photo ID Proof No. (Kindly Enclose the self attested copy)  | Driving License Passport  ID No                   | Aadhar Card Pan Card      |
| Specimen Signature of the Head of the Registered Organization (Kindly Put the Stamp of the Organization)          |   |                           |



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### 2. ARE YOU AFFILIATED WITH ANY UNIVERSITY / BOARD / ORGANIZATION FOR REGULAR EDUCATION? IF SO, GIVE DETAILS

|                | FUR RE  | GULAR EDUCA                             | HON? IF SU                             | , GIVE DETAILS                |                    |
|----------------|---|---|--|-------------------------------|--------------------|
| SL.<br>NO.     | Name of the Institutions  | Name of the University/<br>Organization | Approved Since<br>Year                 | Programmes being<br>Offered   | Number of Students |
|                |   |   |  |                               |                    |
|                |   |   | OH (                                   |                               |                    |
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|                | J. INFRASTRO  | ICTURE DETAIL                           | S OF THE P                             | KOPOSED INST                  | TIOTION            |
| (B) I<br>(C) I | Premises Details ( Ready for Operation  nternet Connectivi  Any Other Informa | on: Yes Not Ye                          | et Broadband                           |                               | Speed:             |
| (5),           | any care mema   |   | tation/intadotify                      | may into to provid            |                    |
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|                |   | 4. PROFIL                               | E OF THE A                             | REA                           |                    |
| (B) I<br>(C) I |   | Area Easily City/Town:                  | (C) Comm<br>P                          | ericial<br>opulation of the D | Station            |

(E) Number of Sr. Secondary Schools: ...... Number of Colleges: ....



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#### 5. MANDATORY DOCUMENTS TO BE ATTACHED WITH THE ABOVE SAID APPLICATIONS FOR PROCESS

| SL.<br>NO. | Particulars  | Yes | No | Remarks |
|------------|--|-----|----|---------|
| 1          | Completely filled Information Form   |     |    |         |
| 2          | Registration Certificate & Memorandum of Trust or Company registered u/s 25.     | -4  |    |         |
| 3          | Resolution of Society, Trust or Company registered u/s 25                        |     |    |         |
| 4          | PAN Number of the Institution / Industry   |     |    |         |
| 5          | Address proof (Leased Deed / Rent Agreement/<br>Sale Deed / Ownership Documents) |     |    |         |
| 6          | Photo ID Proof of the Head of the Institution/<br>Industry                       |     |    |         |
| 7          | Copy of the Educational Certificates of the Coordinator                          | 4   |    |         |
| 8          | Photo ID Proof of the Coordinator/ Center Incharge                               |     |    |         |
|            |  |     |    |         |

Please Affix Your Passport Size Photo

**Signature of the Project Coordinator** 

Seal & Signature of the Head of the Institution/ Industry (Chairman / President / Managing Director / Secretary)



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#### **MEMORANDUM OF AGREEMENT**

|   | S/O   |
|---|---|
| 2/0   | 5/0   |
| R/O   |   |
|   |   |
|   |   |
| I am signing this sa  | magnet by my own DECIPE. I am not taking this   |
|   | greement by my own DESIRE. I am not taking this   |
|   | physical pressure. We both have decided to sign this  |
| reement because to save   | e us both fr <mark>om the fut</mark> ure disputes/ problems.  |
|   |   |
|   |   |
|   |   |
| 1. On Date:   | Month: Year 20 Second party   |
|   | Month: Year 20 Second party is giving   |
|   |   |
| (Mr(In Words:   | ) is giving   |
| (Mr<br>(In Words:<br>(Engineering & Mar   | ) is giving) to first party nagement Institute of India) as Member /ARC.  |
| (Mr(In Words:<br>(Engineering & Mar<br>This is non refundal   | ) is giving) to first party   |
| (Mr<br>(In Words:<br>(Engineering & Mar   | ) is giving) to first party nagement Institute of India) as Member /ARC.  |
| (Mr(In Words:(Engineering & Mar<br>This is non refundal<br>by my own will.  | ) is giving) to first party nagement Institute of India) as Member /ARC.  |
| (Mr(In Words:(Engineering & Mar<br>This is non refundal<br>by my own will.  | ) is giving) to first party nagement Institute of India) as Member /ARC. ble payment. I am giving this amount/ money ng responsibility of keeping away of all legal |
| (Mr(In Words:(Engineering & Man<br>This is non refundal<br>by my own will.<br>2. Second party is takin<br>disputes/ problems. | ) is giving) to first party nagement Institute of India) as Member /ARC. ble payment. I am giving this amount/ money ng responsibility of keeping away of all legal |
| (Mr   | ) is giving   |
| (Mr   | ) is giving) to first party nagement Institute of India) as Member /ARC. ble payment. I am giving this amount/ money ng responsibility of keeping away of all legal |
| (Mr   | ) is giving   |
| (Mr   | ) is giving   |

First Party LEFT
Thumbprint & signature

Second Party LEFT
Thumbprint & signature