

To

The Director

Udyam Kaushal Shikshan Sansthan

Kalayat (Haryana)- 136117

Sub: Establishment New Authorized Training Centre at Town/City

Tehsil.....District.....State.....Pin.....

Respected Sir,

I.....S/o, D/o Sh.....running a training Institute namedsince.....
I haveclass rooms and regular students. We have necessary infrastructure for the students, like Computers, Internet, Power Backup & other all study tools. We haveteachers, which are teaching all computer/beauty/others subjects to the students. I am educationist & already working in the field of education. Now I want to Now I want to start work with “**Udyam Kaushal Shikshan Sansthan**”, Kalayat (Hry). We submitted all required documents. Kindly, provide us your Authorized Training Centre Certificate & Login ID for my training centre. I will submit the fee for certificate per student admission/exam fee of each programmers to the secretary within seven days of admission of the students in the shape of **Transfer in favor of “Udyam Kaushal Shikshan Sansthan**. I will follow all the rules & regulations/instructions of **Udyam Kaushal Shikshan Sansthan**

Yours Sincerely

Dated:.....

Place:.....

Signature & Seal
 of Director of Institute

APPLICATION FOR NEW AUTHORIZATION TRAINING CENTRE

(This form must be deposited in triplicate and must be filled in CAPITAL LETTERS only)

PART – I PERSONAL DETAILS

01. Name of the Institute / Centre:.....

02. Postal Address with Pin Code (Kindly mention the nearest land mark also)

.....City / Town.....

..... State :Pin Code.....

03. Telephone No.Mobile :

Website.....Email id

PAN NoGST No.

04. Name of the Registered Society / Trust (Enclose copy of registration)MSME certificate Address (with Pin Code & Nearest Land Mark):

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05. Attach a copy of the Institute Director, Driving License / Voter Id Card / Passport/PAN Card

06. Name of President / Chairman/ Trustee/ Proprietor of the Society Trust / Centre / Institute

(a). Educational qualification of & give details as under

Degree / Diploma	University / Institution	Subjects	Year of Passing

07. I / We UNDERSTOOD that I/we have to make all the payments directly in shape of transfer to the **Udyam Kaushal Shikshan Sansthan** and **not to pay any amount to any Development Officer or Business Coordinator or any body in cash..**

08. **STAFF:** I/We am/are enclosing herewith bio-data of the faculties. The details of staff as per the fixed norms and actual is as under:-

Office Staff Required as per norms Actual Available

Management :	1	
Faculty :	4	
Counselor:	1	
Peon :	1	

PART – II- INFRASTRUCTUREDETAILS

1. Current Infrastructure details that is available for educational purpose :

(a) Total area of the Institute : (in sq.ft.)

(b) Total covered area : (in sq.ft.)

(c) Number of Floors :

(d) No. of Rooms available :

(e) Power Backup :

(f) No. of Computers available/ Parlour Chair/other requirement :

(g) Internet facility available :

2. Details of Premises (Attach Relevant Documentary Proof) :

(a) Whether the land & building are owned or rented by the Center.

(b) If the building is rented, enclose the lease deed of the Society / Institution.

3. Whether the premises is ready for use if yes what it is currently used for

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4. If your centre is also associated with any other university / institution. (Give Details)

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5. Attach one set of Visiting Card, Letter Head & Profile of your Institute

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DECLARATION

I/we hereby declare that the details provided by me/us herein above are true to best of my/our knowledge

Dated :

Place :

Signature

AUTHORIZATION FEE DETAILS

Transfer id..... Date:.....Drawn on (Bank Name).....

Amount (in figures) Rs.....Amount (in words) Rs.

Passport

Size Photo

Director/
Partner

Signature & seal of Director/Proprietor of Institute

UNDERTAKING BY THE ADMISSION & COUNSELLING CENTRE

COUNSELLOR/DIRECTOR NAME

INSTITUTE NAME & ADDRESS

WHATSAPP NO.MOBILE NO.....

EMAIL ID

CENTRE CODE..... COURSES OFFERED

- I am interested to work with your prestigious institute .
- The students with the admission procedure of the institute and collaborative, give them all the details relating to the programs offered and help the students secure admission.
- I ensure that I shall not harm the image of the institute by any means.
- I shall not be involved in any negative or misleading promotions for the institute .
- I shall strictly follow the instructions of the institute. Whatever information will. be shared by the institute on the website will be treated as final and authentic.
- I shall have no objection to the sharing percentage as fixed by the institute.
- I shall abide by the policy for the non-transfer of the Centre for re-registration cases.
- I shall not disclose any data or any information related to the institute to anyone.
- I shall have no objection to getting and giving all the services in digital mode.
- I shall not misuse the online deliver by the institute in any case.
- I assure to forward the queries for the regular courses to institute.
- I shall have no objection to changing the sharing percentage on non-achieving of the target given to me by the institute.

- I shall always fulfill its obligations with honesty and integrity and shall not act in any manner. detrimental to the interests and goodwill of the institute . In case of any discrepancy, the decision of institute will be considered the final and shall never take any legal action against the institute for any matter.

Passport
Size Photo
Director/
Partner

Signature & seal of Director/Proprietor of Institute