

APPLICATION FORM FOR CENTER

1.	Name of the organization/Institution:							
2.	Year of Establishment: (Please Attach Proof)							
3.	Type of Organization/Institution: (Please Attach Proof) Trust Society							
4. Full postal Address:								
5.	Official Communication:							
	Phone No:							
	Mobile No: +91Alternate							
	E-mail:							
	Fill the Following and Enclosed Proper Proof:							
6.	Premises Details: Owned Rented							
7.	. Total carpet Area of Organization/Institution (Sq.Ft.):							
8.	Total site Area of Organization/Institution (Sq.Ft.):							
9.	Internet Connectivity: Yes No							
10	. Details of co	omputer (Dedi	cated Earm	arked for Trai	ning and Resea	rch Purpose)		
	Туре	Processor	Ram	HDD	Network	Internet		
					(Y/N)	(Y/N)		
	Server							
	Computer							
	Client							
	Computer							
11	. Infrastructu	re Details:						
	Gen	nrator	LCD Playe	r F	ax P	hotocopier		

S.No	Other Infrasturcture for	Units	Area (Sq.Ft.)	Seating Capacity
•	Training			
1.	Class Rooms			
2.	Library (Total Books)			
3.	Reading			
	Room/conference Room/			
	Audio Visual Room			
4.	Administrative Area			
5.	Trainer Room			
6.	Service Area-Toilets etc.			
7.	Other			

12. Details of Courses that you are Interested to offer through VBSE: (Use Separate Sheet, If Necessary)

S.No.	Proposed Course	Expected No. Of Admission	S.No.	Proposed Course	Expected No. Of Admission
1.			6.		
2.			7.		
3.			8.		
4.			9.		
5.			10.		

3.'Wide range Photograph showing the locality of the Organization'					

DIRECTOR PROFILE

1. Name:					
2. Designation:					
3.Gender: Male Female	РНОТО				
4. Qualification:	111010				
5. Experience :					
6.Photo ID Proof: (Kindly enclose the copy)					
Driving Licencse Passport Voter ID PA	AN Card				
7. Aadhar Card No:					
<u>DECLARATION</u>					
In Support of the application, I certify that, having read the Norms and Procedure for accreditation of institution, I undertake to ensure that the Institution will abide by the Rules and Regulations and terms and conditions, as are made applicable to the Academic Director, from time to time. I further affirm that accreditation, if granted to the Institution, will not be used for commercial purpose, rather will be used to serve the needs of the VBSE students.					
I have carefully read and understood all the guideline, specifications and other information published by the Vidarbha Board Of Secondary Education. In case of any disputes or for any unforeseen issue(s) or issues not covered in the guidelines, specification and other information published by the VBSE, the decision of the VBSE shall be final and binding on me and all other concerned. I agree that the Vidarbha Board Of Secondary Education reserves the right to withdraw any location of					
any Discipline/Programme or its nomenclature at any time without assigning any reason and to make modification in any information published anywhere whenever deemed necessary.					
In any dispute the courts of Vidarbha Board Of Secondary Education shall have e	xclusive jurisdiction.				
Date:					

DOCUMENTS TO BE ATTACHED

- 1. An Application For Requesting Academic Director.
- 2. Organization Registration Certificate Copy.
- 3. Resolution Of Scociety/Trust/Pvt. Ltd. For Coordinator.
- 4. Copy of MOA/AOA/Byelaws of Society/Trust/ Pvt.Ltd.
- 5. Organization PAN Copy.
- 6. Organization PAN Copy.
- 7. Aadhar Card Copy of Organization head.
- 8. Organization Building Ownership Proof/Rent Deed.
- 9. Bank Account Details of Organization.
- 10. Organization Building Map.
- 11. List of Staff Members.
- 12. Affidavit Of Organization (Rs. 10/-).

ORGANIZATION AFFIDAVIT

INDIAN Non-Judicial Paper Rs.10/-

IS/o	
is the President/Chairman of	situated at
Reg.No.	do solemnly declare that we are
conducting the course Vidharbha Board of State,	Secondary Education, Nagpur motive of our educational
Charity/Trust/Organization is to spread education youth & women Regular/Private Education. We assure principle	·
of your Institution/Organization in our proceedings.	

*NOTE:- Only Print On affidavit.

*NOTE:- Sample Only (Not For Use)

[This has to be taken as print out in School Letterhead]

То,	
The Director, Vidarbha Board of Secondary Education Nagpur (Maharashtra)	',
Dear Sir/Madam,	
Sub: Appointment as Course Counsello Secondary Education Examination-Reg. We have decided to appoint Mr./MrsCounselling, Guidance, enrolling students and of our institution. He will co-operate and coo Of Secondary Education (VBSE) in the school particle of the school par	interacting with all the activities on behalf rdinate all the activities of Vidarbha Board premises. Of Vidarbha Board Of Secondary Education use our laboratory facilities for Physics, where we will conduct the of Vidarbha Board of Secondary Education
Place: Date:	Yours Truly, Seal and Signature