



जवाहरलाल नेहरू तकनीकी शिक्षा - कौशल विकास की परिषद
JAWAHARLAL NEHRU TECHNICAL EDUCATION
COUNCIL OF SKILL DEVELOPMENT

[Established under act 1882, Government of National Capital Territory Delhi, INDIA]

(An Autonomous Body)

Affiliation Procedure

1. **Fill up Authorised Training Center Application Form (Application request letter must be printed on the Letterhead of the Institution).**
2. **The following documents are to be enclosed with the Application Form for approval as an Authorised Training Center:**
 - i. **Entity proof:** Copy of Society /Trust /Company /Partnership Firm Registration. **If Entity is Private Limited Company:** Copy of Memorandum of Association & Articles of Association.
 - ii. **Accommodation Proof :** Building Lease Deed / Rental Agreement /Ownership /Registry / Allotment copies (Agreement should be in the name of either Institution name or Sponsored Society name on Rs.100 stamp paper).
 - iii. **Entity Pan Card :** Society / Trust / Company / Partnership Firm Pan Card Copy.
 - iv. **Personal Pan Card :** Owner / President / Chairman / Director Pan Card Copy.
 - v. **Personal Id :** Aadhar Card / Voter ID/ Passport / Driving License copy (Any one id proof).
 - vi. **Staff :** List of teaching and non-teaching staff with Designation , Academic / Technical Qualification & Experience.
 - vii. **Building Photos:** Photographs of the Entrance, Front view of the Building, infrastructure facilities like class rooms, Practical Labs etc. जवाहर लाल नेहरू तकनीकी शिक्षा
 - viii. **Map of Building :** Institutional / Working / Floor Plan. JNTE-CSD
 - ix. **MOU's Signed:** Copies of MOU's signed with various Organisations for providing OJT / Industrial Training / Apprenticeship / Placements etc.
 - x. Authorised Training Center affiliation Fee should be paid vide a Demand Draft / Cheque in favor of "JNTE-CSD" payable at Hyderabad.

NOTE: Please read the following instructions carefully before filling in the form.

1. Obtain all details regarding Rules & Regulations of JNTE – CSD and other related information as there is no provision of affiliation fees refund.
2. Use only prescribed Application Form and All the enclosures and documents photocopies should be self-attested & stamped.
3. Separate Affiliation form to be used for Institutions having different premises /Locations /Branches.

2. Name of the Sector applied for _____

a. _____

b. _____

c. _____

d. _____

e. _____

3. Infrastructure of the Institution:

PARTICULARS	NO.OF ROOMS	SEATING CAPACITY	TOTAL AREA(SQ.FT)
Reception			
Director			
Staff Room			
Class Room			
Practical Lab			
Library			
Canteen			
Toilets			
Any Other			

Total area of the Institution: _____

Signature
Director / Head of the Institution with seal

4. A) Information about Teaching Staff (As on Date of proposal):

Sl. No.	Name	Designation & Subject	Qual.	Teaching Experience	Date Of Appointment	Status Full / Part Time
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

B) Information about Non-Teaching Staff (As on Date of proposal):

Sl. No.	Name	Designation	Qual.	Experience	Date Of Appointment	Status Full / Part Time
		जवाहर लाल नेहरू तकनीकी शिक्षा				
		JNTE-CSD				

Signature
Director / Head of the Institution with seal



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Director Profile

Photograph of
the Director

1. Director Name : _____

2. Designation : _____

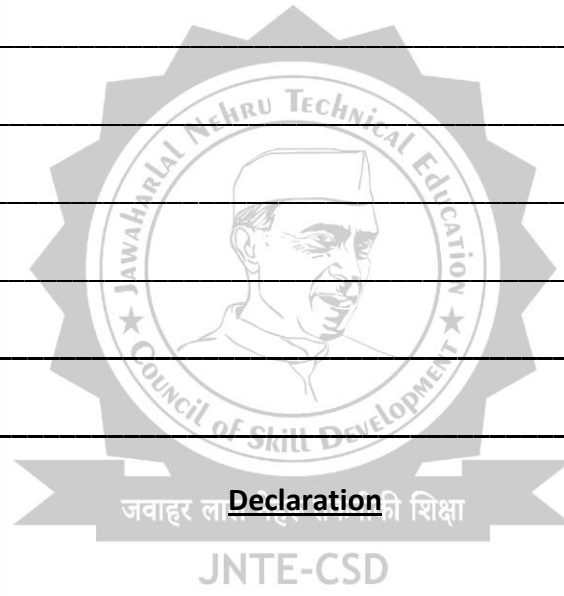
3. Educational Qualification: _____

4. Professional Experience: _____

5. Aadhar Number: _____

6. PAN Card Number: _____

7. Address : _____



Declaration

जवाहर लाल नेहरू तकनीकी शिक्षा

JNTE-CSD

On behalf of the Institute _____

I _____ S/o or D/o _____

Do here by declare that the particulars furnished above are correct to the best of my knowledge and belief and that I am prepared to undergo any punishment imposed on me if any of the particulars furnished are found to be false and misleading. I also further declare that I shall abide by the conditions, rules and regulative measures imposed by the JNTE-CSD from time to time for granting permission/affiliation to establish and run this institution. In future I shall never claim anywhere against JNTE-CSD as I read out all the information related to JNTE-CSD. If I do this court shall disable me.

(Encloses copy of Aadhar and PAN Card)

Date:

Signature

Director / Head of the Institution with seal



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Center Photos to be pasted

Space for affixing wide Range Photograph showing the locality of the institution



UNDERTAKING

I understand and agree that fees paid by me with the application form or on account of processing fee, for conduct of inspection, for grant of approval of my application or any other fee or charges, as prescribed for ATC once paid, will be non-refundable. Withdrawal of my proposal or rejection by the JNTE-CSD at any stage for reason what so ever shall not entitle me to claim any amount or compensation from the JNTE-CSD.

Signature

Director / Head of the Institution with seal

To
The Chairman
JAWAHARLAL NEHRU TECHNICAL EDUCATION
COUNCIL OF SKILL DEVELOPMENT
HYDERABAD, INDIA.

Date:

SUB: Application for ATC/MATC of JNTE CSD atrequest:

Dear Sir/Madam

We, here by submitting the application form for new Authorized Training Center (ATC) of JNTE CSD. We certify that we have very well understood our responsibilities and the implications of the scheme. We undertake to follow all the instructions issued by the JNTE CSD from time to time. We assure to follow all the rules and regulations, terms & conditions of JNTE CSD. We further assure you that we will try our level best to provide quality education to fulfill the objectives of the JNTE CSD.

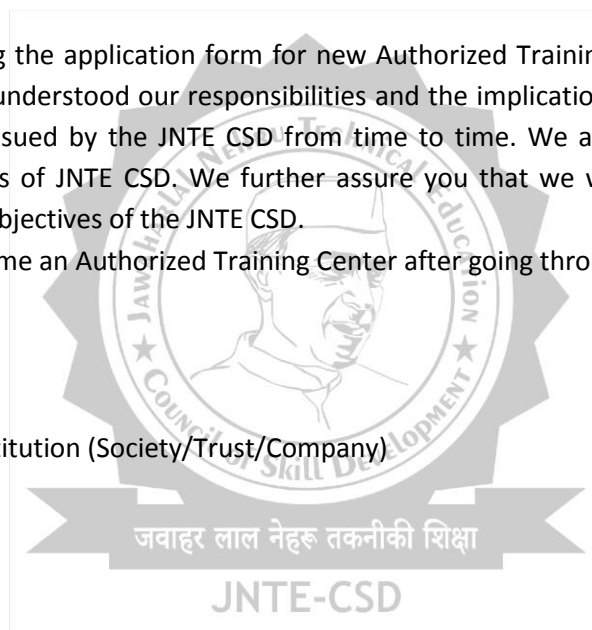
Hence, we request you to allot me an Authorized Training Center after going through necessary formalities.

Thanking you,

Authorized Signatory of the Institution (Society/Trust/Company)

Name:

Designation.....



Signature & Seal with date: