

c) Fax No.

d) E-mail Address

राष्ट्रीय मुक्त विध्यालय शिक्षा परिषद्

Pational Institute Council For Open Education An ISO 9001:2015 Certified Organization

| | NICOE | 7 III 100 000 ZIZO ZO COLINICA O I BAINIZACION | |
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| A | pplication for Me | embership | |
| | | | |
| | | ite Coordinator [], Regional Coordinator [], ordinator [], Coordinator [] | Paste your recent colour photo |
| 1. Ins | stitution information: | | |
| 1.1) | Name of the Institute (Use E | Block Letters only) : | |
| | | | |
| 1.2) | Type of Institute (Tick) | : Trust [], Society [], Private Ltd. Co. [], Partnership firm | [], Personal [] |
| 1.3) | Date and Registration Numl | per of Trust | |
| 1.4) | / Society / Others (Please a Postal Address | ttach proof) : | |
| 1.5) | Communication Details: a) Telephone (With STD) b) Mobile No. c) Fax No. d) Website e) E-mail Address | COUNCIL TM Pin: | |
| | tails of Management: | A. O. O. | |
| 2.2) [2.3) [| Name of the Head Manageme Designation Educational qualifications | ent: NICOE | |
| | Profession and Experiences | : | |
| | PAN No. (Encl. the copy) | : | |
| 2.7) | Two recent colour photograph Postal Address | | |
| | | Disc. | |
| 2.9) | Communication Details: a) Telephone (With STD) b) Mobile No. | :Pin: | |

| 3.1) Location of proposed Institute area | | | | | Metro [], District HQ [], Town [], Rural [] | | | |
|--|--|--|------------------|---|---|---|-----------------------------------|--|
| 3.2) Bu | uilding is | | | |], Rent [I please enclos |], Other [] e the rental agree | ement copy) | |
| 3.3) Ins | stitute area | | | : | | Sq.ft. | | |
| 4) Inst | itute Facilities available: | | | | | | | |
| 4.1) Theory Class room | | : No. of Rooms [|], | Area [|] Sq.ft., | Seating capac | ity [| |
| 4.2) Computer Lab | | : No. of Rooms [|], | Area [|] Sq.ft., | Seating capac | ity [| |
| 4.3) Library | | : No. of Rooms [|], | Area [|] Sq.ft., | Seating capac | ity [| |
| 4.4) Office Room | | : No. of Rooms [|], | Area [|] Sq.ft., | Seating capac | ity [| |
| 4.5) Stuff Room | | : No. of Rooms [|], | Area [|] Sq.ft., | Seating capac | ity [] | |
| 5) Con | nputer Lab: | | | | | | | |
| (5.1) N | umber of computer | : | _ (5. | .2) Printer: Yes | s [], No [], | (5.3) Scanner: Ye | es [], No [] | |
| (5.4) A | ir conditioner: Yes [], No [|], (5.5) Emergency | у ро | wer supply: Ye | es [], No [] | , | | |
| (5.6) T | ype of computer | : | OU | NCIL | | | | |
| | | 14 | | - Op | TM | | | |
| 0) 1 5 | | | | 36 | D I IVI | | | |
| 6) Into | rmation about Stuff/s (As | on date of proposa | al) | | 型 | ı | | |
| SI. No. | Name | Designation | | Qualification | Teaching Experience | Date of Appointment | Status Full Time/ Part Time | |
| | | OI, | | | | | | |
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| I seek me regard. A candidati | ion by the Applicant: I hereby declare the best of All India Council for Ope for bing fully satisfied recognition studies for membership will be liable for a ntre's Address (In English | n Education (AICOE). I'we j atus, I am applying for Men ancellation at any time & I, | fulfill mbers | the minimum crite hip. In the event of | ria and have furnish any information in t | ed above, the necessar this being found incorre ofee paid by me/us. | y information in this | |
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3) Infra structural Facilities:

Seal of the Institute

Website: www.nicoe.in, Email: info@nicoe.in

Signature of the Applicant