

APPLICATION FORM FOR EMPANELMENT OF SERVICE PROVIDER

Application for:

State :

District :

Block:

(Separate application form has to be submitted for separate state)

Details of the Institutes (Tally with original record is essential for following information)

A. Name of the organization :

Postal Address:

City :

District:

State:

Pin:

Telephone No (Std Code):

Mobile:

Email Address:

Website :

B. Type of Organization: Government/Pvt/NGO/Trust/Partnership/Other

C. Date of Establishment:

D. Year of Registration:

E. Registration no :

F. Period up to which registration is valid :

(Attach attested photocopy of copy of registration certificate as Enclosure- I)

G. Details of the Owner/President/Chairman/Head/Branch Head of the organization/Institute

i. Name:

ii. Designation:

iii. Address : .

District:

State:

Pin:

iv. Phone no with STD Code

v. Mobile Phone no

vi. Email address

H. Bank Details of the organization

1. Name of the Bank :

2. Branch Name:

3. Branch Code:

4. Bank Account No:

5. IFSC Code:

I. PAN No: **(Attach attested photocopy of PAN Card as Enclosure- II)**

J. Details of infrastructure & Academic Facilities

i. Is the institute/Organization located in rented building or own building?

ii. If own Building, land record/ sell letter available or not: Yes/No

(Enclose Photocopy of land record/Sell letter as Enclosure-III)

iii. If Building is on rent, the rental agreement is registered or not: Yes/No

(Enclose Photocopy of rental agreement as Enclosure-IV)

iv. Physical Size: Total built up area of the organization : (In Sq ft)

v. Enclose photograph of the front view of the premises of the organization in **Enclosure-V**

vi. Details of infrastructure (If necessary add separate sheet)

SI No	Item	Size (In Sq ft)	Seating Capacity	Enclose Photograph as
01	Front office/Reception area			Front-1
02	Class Room -1			Class-1
03	Class Room -2			Class-2
04	Staff Room			Staff
05	Practical room			Practical Room 1
06	Practical room			Practical Room 1
07	Auditorium/Hall			Hall
08	Other Room			Other Room 1

(Enclose photograph in **Enclosure-VI** and photocopy of Layout plan drawing as **Enclosure-VII** of the above infrastructure duly certified by architect/engineer/consultant as clearly indicating address of the infrastructure with details of certified architect/engineer/Consultant Name, Designation, Qualification etc with stamp & seal).

vii. Detail of critical equipment that are more extensively used for practical training in given trade (If necessary add separate sheet) Enclose details in **Enclosure VIII**.

Sl. No	Trade	Name of the equipment	Qty	Remark

viii. Other Facilities

- Toilet for boys Yes/No
- Toilet for girls Yes/No
- Facility for drinking water Yes/No
- Power backup facility such as inverter/generator Yes/No
- Training aid like projector, audio/visual equipment etc Yes/No

f) Does the institute/organization have branches? Yes/No

If yes enclose details in **Enclosure-IX**

- Details of the Branch as per Clause Serial no **A**
- Details of Branch Head as per Clause Serial no **G**
- Details of infrastructure & Academic Facilities as per Clause Serial no **J**

K. Summary of Master trainers. (Enclose detail in Enclosure X)

Sl. No	Trade	Name	Degree/Diploma	Additional training certificate	Industry Experience/ Experience of Training	Remark

L. Does any staff/member of your organization have undergone any training on Entrepreneurship or ToT? If yes give detail as follows in **Enclosure XI**

Sl No	Name	Name of the training	Duration	Organised by	Year

M. Experience in organising vocational training (if necessary add separate sheet) Give detail as follows in **Enclosure XII**

Sl No	Name of the training/Trade	No of person trained		No of person Employed		No of person self Employed	
		2019-20	2020-21	2019-20	2020-21	2019-20	2020-21

N. Activity report / Annual report / Balance Sheet of 2018-19 and 2019-20 (Enclose detail in **Enclosure XIII)**

Any other information:

DECLARATION

1. All information provided in the application are true and correct and all documents accompanying with this application are true copies of their respective originals.
2. I/We shall make available to SIGN-IN any additional information it may deem necessary or require for supplementing or authenticating the Proposal.
3. I/We acknowledge the right of the Employer to reject our application without assigning any reason or otherwise and hereby waive our right to challenge the same on any account whatsoever.
4. I/We further certify that no member of our organization is an employee (permanent or contractual) of SIGN-IN
5. I/We further certify that our organization has not been placed under black list by any govt agencies

Signature
Director/CEO/President/Secretary/Head of Organization
Seal & Date

Sl No	Name of the Enclosure	Enclosed
I	Attested photocopy of copy of registration certificate	Yes/No
II	Attested photocopy of copy of PAN Card	Yes/No
III	Photocopy of land record/Sell letter	Yes/No
IV	Photocopy of rental agreement	Yes/No
V	Photograph of the front view of the premises of the organization	Yes/No
VI	Photograph of the infrastructure	Yes/No
VII	Layout plan drawing of the premises of the organization	Yes/No
VIII	Detail of critical equipment that are more extensively used for practical training in given trade	Yes/No
IX	Information about branches	Yes/No
X	Summary of Master trainers	Yes/No
XI	Information about Entrepreneurship training attended	Yes/No
XII	Experience in organisng vocational training	Yes/No
XIII	Activity report of year 2012-13 and 2013-14	Yes/No

GENERAL INSTRUCTIONS:

- All columns must be filled up in legible handwriting or by printing.
- Submit all enclosure with the application form by spiral binding
- All enclosure should be signed with stamp & seal of the organization