

An ISO 9001: 2015 Certified India's Largest Computer Educational Organization.

# NATIONAL COMPUTER EDUCATION CENTRE



Registered Under Ministry of Corporate Affairs, Govt. of India.

Corporate Identification No. U80903WB2018PTC371396

Regd. Office – Parbatidanga, Habibpur, Malda, 732138, W.B.

Help Line -7478619292, E-mail – ncecmalda@gmail.com

[www.ncecskillindia.in](http://www.ncecskillindia.in)



## APPLICATION FORM FOR AFFILIATION

To,

The Chairman,

National Computer Education Centre,

Parbatidanga, Habibpur,

Malda, W.B, 732138

SUB : Application For Franchisee Of NCEC at \_\_\_\_\_

Respected Sir,

I, Director of \_\_\_\_\_ interested to be a

Franchisee member of the Education & training Programs of national Computer Education Centre at Block of \_\_\_\_\_ District of \_\_\_\_\_ in the state of \_\_\_\_\_. I am submitting my personal & centre profile

in this letter. We will abide by the rules and regulations laid down by your organization (National Computer Education Centre). Also we will invite you for inspection and verification of our centre. We pay the necessary charges for the inspection.

I request you to grant me a franchisee after going through necessary formalities.

Thanking You,

Yours faithfully,



Institution Head / Institution director

(Signature with seal)

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## Application Form For Affiliation

Details of Available Facilities of the Centre (Tools & Equipment):

| Sl No | Name of Tools Equipment & Machinery | Yes / No | Quantity | Describe |
|-------|-------------------------------------|----------|----------|----------|
| 1     | Computer                            |          |          |          |
| 2     | Laptop                              |          |          |          |
| 3     | Printer                             |          |          |          |
| 4     | Scanner                             |          |          |          |
| 5     | Generator or Inverter               |          |          |          |
| 6     | Biometric devices                   |          |          |          |
| 7     | CCTV camera                         |          |          |          |
| 8     | CD Writer                           |          |          |          |
| 9     | Microsoft Windows                   |          |          |          |
| 10    | Microsoft Office                    |          |          |          |
| 11    | Tally 9 Single / Multi User         |          |          |          |
| 12    | Antivirus Software (Popular Brand)  |          |          |          |

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## Application Form for Affiliation

Name of Institution Head / Institution Director:

Complete Address of the Institution Head / Institution Director:

|                         |  |                    |     |
|-------------------------|--|--------------------|-----|
| Phone No                |  | Email              |     |
| Nationality             |  | Religion           | Sex |
| Education Qualification |  | Experience Details |     |

Profile and Education Details of Faculty :

| Sl No. | Name | Designation | Qualification |
|--------|------|-------------|---------------|
|        |      |             |               |
|        |      |             |               |
|        |      |             |               |
|        |      |             |               |

## Declaration By The Head Of Institution

All the information's give above are true to the best of my knowledge and nothing is concealed therein, I have read & understood the term & conditions made by National Computer Education Centre & accept the same. In case of any infringement of said terms and conditions by me ,National Computer Education Centre H.O/R.O/ Centre head , shall have full right to cancel above mentioned Franchises.

Thanking You,

Yours faithfully,

Institution Head / Institution Director

(Signature with Seal)



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## Application Form for Affiliation

Fill in the Complete in BLOCK CAPITAL LETTERS (ENGLISH)

Name of Training Institution :

Institution Applying for (Please ✓ tick the appropriate) :

|                       |                          |             |                          |                |                          |             |                          |
|-----------------------|--------------------------|-------------|--------------------------|----------------|--------------------------|-------------|--------------------------|
| Training Institution: | <input type="checkbox"/> | Block Head: | <input type="checkbox"/> | District Head: | <input type="checkbox"/> | State Head: | <input type="checkbox"/> |
|-----------------------|--------------------------|-------------|--------------------------|----------------|--------------------------|-------------|--------------------------|

Complete Address of the Institution ( Kindly mention the nearest land mark also) :

|        |                      |          |                      |
|--------|----------------------|----------|----------------------|
| State  | <input type="text"/> | District | <input type="text"/> |
| Pin No | <input type="text"/> | Phone No | <input type="text"/> |
| Email  | <input type="text"/> | Website  | <input type="text"/> |

Location of the Centre (Please ✓ tick the appropriate) :

|      |                          |      |                          |         |                          |
|------|--------------------------|------|--------------------------|---------|--------------------------|
| City | <input type="checkbox"/> | Town | <input type="checkbox"/> | Village | <input type="checkbox"/> |
|------|--------------------------|------|--------------------------|---------|--------------------------|

Available Infrastructure Facility of the Centre:

| Sl No | Particular                               | No.of Rooms | Area in Sq. Ft. |
|-------|--|-------------|-----------------|
| 1     | Theory Class Room                        |             |                 |
| 2     | Practical Class Room                     |             |                 |
| 3     | Library Room (If Any)                    |             |                 |
| 4     | Reception Area (If Any)                  |             |                 |
| 5     | Institute Head / Director Room           |             |                 |
| 6     | Staff Room (If Any)                      |             |                 |
| 7     | Total Area of the Training Institution : |             |                 |