

(iii) E-Mail ID	
(iv) Experience Details	
(v) Computer Knowledge details	

8. Infrastructure Details:

(i) Location of Proposed Institution Area ✓ (Kindly tick whichever is applicable)	Metro	
	District HQ	
	Town	
	Others	
(ii) The Building of the Centre is ✓ (Kindly tick whichever is applicable)	Own self	
	Rented	
	Others	
(iii) Total Carpet area of Franchisee Centre (in Sq. ft):		
(iv) Total area of Franchisee Centre (in Sq. ft):		
(v) Type of Flooring of the Franchisee Centre		

9. Institution Facilities Available:

Sl. No.	Type of Facility	No. of Rooms	Area (in Sq. ft)	Seating Capacity
(i)	Class Room			
(ii)	Computer Lab Room			
(iii)	Counselling Room			
(iv)	Wetting Room			
(v)	Toilet(Yes/No)	For Male.....	For Female.....	

10. Hardware Available:

Sl. No.	Type of Facility	Count
(i)	Number of Computer Sets	
(ii)	Number of Laptop	
(iii)	Number of Printer	
(iv)	Number of Scanner	
(v)	Number of UPS	
(vi)	Any others Hardware Details	

11. Type of Internet Facility

Leased Line Broad Band Dialup Other _____

12. Details of Software Available:

Sl. No	OS / Compiler / Package / Programme/ RDBMS / Language / Application Development Software	VERSION

13. Library is available (Only fill-up as Yes/No.)

If available then fill the followings:

Sl. No.	Category	count
(i)	Reference Books	
(ii)	Text / Subject Books	
(iii)	Periodicals Subscribed	
(iv)	Journals Subscribed	
(v)	Newspapers Subscribed	
(vi)	Course CDs	
(vii)	Course Audio / Video Cassettes	
(viii)	Books other than IT Course Books	

14. Equipment's Available:

Sl. No.	Equipment	Count
(i)	Generator	
(ii)	LCD Projector	
(iii)	OHP	
(iv)	Fax	
(v)	Photocopier	

15. Faculty Details:

Sl. No	Name	Designation	Qualification	Teaching Experience (in Year)

(Kindly enclose Bio Data, Self-Attested photocopy of educational qualification for faculties)

16. Is The Applicant is running any others business on the same premises or Recognized As Study Centre of Any Other – Yes / No

If Answer is Yes then Kindly gives the following details:

SL. NO	Name of the Organization	Recognized As	Program Undertaken

DECLARATION

- (i) I /We certify that all the information given above and in the preceding pages signed by me / us / is / are complete and correct.
- (ii) I / We declare that the institute will abide by all the rules and directions of Youth Success Computer Saksharta Mission (YSCSM)
- (iii) I / We declare that I / We am / are authorized to sign on behalf of my organization and that my directors and shareholders / members (Where relevant) are in total agreement of my / our application.
- (iv) In case of any information furnished by me / us is found wrong or incomplete, I/ We declare that the institute may be derecognized and is also open to any action as per law.
- (v) I/ We here by undertake that if it is ever found that the institution is not able to run as per the norms, rules and procedures laid down by Youth Success Computer Saksharta Mission shall be free to withdraw the study centre recognition.
- (vi) I / We understand that the approval of my / our institution as Study Centre shall be done as per the norms of the Youth Success Computer Saksharta Mission.

Place:

Date:

Applicant Signature, Name and Seal

Place:

Date:

Centre Director Signature, Name and Seal