Success Computer Saksharta Mission

A National Educational Programme of Computer Literacy & Development of Information Technology

An Autonomous Institution Registered Under the Public Trust Act, Regd. No. IV-05252 W.B, Govt. of India.
Registered under Indian Planning Commission & An ISO 9001 : 2008 Certified Organisation.
Registered under C.R. Act Ministry of HRD, (Department of Secondary & Higher Education)
Govt. of India.

Application Form for New Study Center / Zonal Head / State Co-ordinator

1. Name of Institute * :

2. Institute Head / Director Name * :

3. Father's Name :

4. Postal Address of Institute * :

Block * :   City * :

State * :   Dist :

Pin No * :   Ph/Mobile No * :

Email Address * :

5. Postal Address of Residence * :

Block * :   City * :

State * :   Dist :

Pin No * :   Ph/Mobile No * :

6. * Fill up the Required Study Centers in the Column Below -

(Which department are you run at your center :

Computer / Vocational / Technical / Pvt. School / Pvt. Madrasha / Coaching / Others)

7. Total Space Available in the Study center (In Sq. Feet)

8. How many PC Available :   9. Internet Facility :   Yes   No

10. Center Information (* Correctly Mentioned)

Inst. Head Room		Theory Room		Practical Room		Library Room		Reception		Staff Room	
Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No

11. Are you presently :

(Franchises / Franchiser / NGO / Trust / Society / Pvt. Firm / Partnership Firm / Ltd / Other's) Fill-Up

12. No of Faculty or Teacher :

Declaration

1. I / we hereby declare that the details provided by me / us herein above are true to best of my / our Knowledge and the Soft ware's that are used in my Training Centre are all licensed.

2. I / We declare that our institute will abide by all the rules and directions of SCSM given time to time.

3. 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.

4. In case of any information furnished by me/us is found wrong or incomplete, I/ We declare that our institute may be derecognized and is also open to take any action as per law.

5. I / We undertake not to do any advertisement of our own in print/electronic media without the prior written permission of SCSM.

6. I / We hereby undertake that if it is ever found that Institution is not able to run as per the norms, rules and procedures lay down by SCSM, SCSM shall be free to withdraw the study centre recognition.

7. I / We shall bound to verify all the original documents of the students and certify that the students who will be registered or will fill the examination form at my/ our study centre for SCSM programs are eligible in all respect as per the eligibility norms of SCSM. I / We shall produce the original documents of the students as and when required by SCSM.

8. I / We understand that SCSM reserves the right to terminate the study centre registration if it is found that I / We have knowingly made a false declaration in the form and
are using any Pirated Server.

9. I / We understand that the approval of my/our institution as Study Centre shall be done as per the Aims & Objectives of SCSM.

10. I declare that there will be sufficient arrangement of drinking water, safety from fire, first aid and toilet facility at our Study Centre.

11. I declare that Success Computer Saksharata Mission can use my Study Centre Premises at any time for the Propagation of Education, Campaigning, Demonstration, Seminar, Tours, Educational Program, and Implementation of Government Projects on Literacy.

12. I / We understand that SCSM shall be free to reserve the right to reject the application without assigning any reason.

      I have understand of norms and rules and will strictly work according to that and will get every activity advertisement approval from SCSM. I understand that all charges, I have paid are fully non-refundable in all circumstances.

Please attached: Qualification , Voter ID & PAN Card Documents of Applicant, Institution Infrastructure Photographs, Computer Lab Infrastructure photographs.

*** All payments should be payable to **Success Computer Saksharta Mission Or SCSM** Account by Demand Draft / RTGS/ Account Transfer.
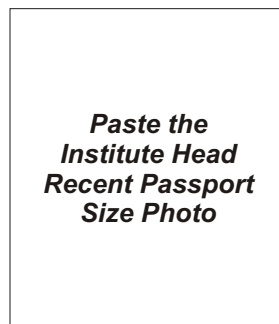
* Signature of the Witness :

1..
Address :

2..
Address :

Paste the Institute Head Recent Passport Size Photo

Signature Head of the Institute

Date : ....

Note : Fill all details in capital letter and use the paper A4 size for document.