

Out No.

Date : / /

To,

The Secretary

Minority Open Education and Technical Board Maharashtra

Dear Sir

We Wish to take state information Centre of the board there by me submitting this application form. We certify that we have very well understood our responsibilities and the implication of the scheme. We undertake to follow all the instruction issued by the board from time to time. We also assure to follow all the rules and regulations, terms, conditions, norms and function of the state Co-coordinator of board. We further assure you to that we will try our will try our level provide quality education to fulfill the objectives of the board.

Authorized Signatory of the
Institution Society / Trust / Company

Name : Name :

Designation : Designation :

Signature & Seal with date :

Signature & Seal with date:

Note : this letter must be typed / photocopied on the letterhead of the institution and attached at the top of application form



MINORITY OPEN EDUCATION & TECHNICAL BOARD, MAHARASHTRA

(An Autonomous Institute Established Under Article 29&30 of Constitution of India)
Regd. with S.R. Act 1860 (Act No XXI of 1860), NITI AAYOG & Ministry of Micro Small & Medium
Enterprise Government of India

Affiliation Form (Regional Center)

Coordinator Details:

1. Name

2. Designation

3. Sex Male Female

4. Qualification

5. Communication Details :

a) Adhar No.

b) Mobile No

c) E-Mail

6. Id Photo Proof. : Driving License Voter ID Pan Card Adhar Card

(Kindly Enclose a Copy)

Institution's Details

1. Name of Trust / Society

2. Name of Institution

3. Date Of Registration Registration No.

4. Type of Institution Trust Society

5. Postal Address

District State

Pin Code

6. Communication Details.

a) Mobile No.

b) E-Mail

7. Permisses Owned Rented

8. Total Area (in sq. ft)

9. Internet Type Leased Line Broadband Dial-up

Available Resources Generator LCD Player Photo Copier

Space for
passport Sixe
Photograph
duly attested

10. Staff Detail

Enclose separate list of all staff member in following format

| Sr.No | Name | Qualification | Gender | Experience | Specialization | Full/ Part Time |
|-------|------|---------------|--------|------------|----------------|-----------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

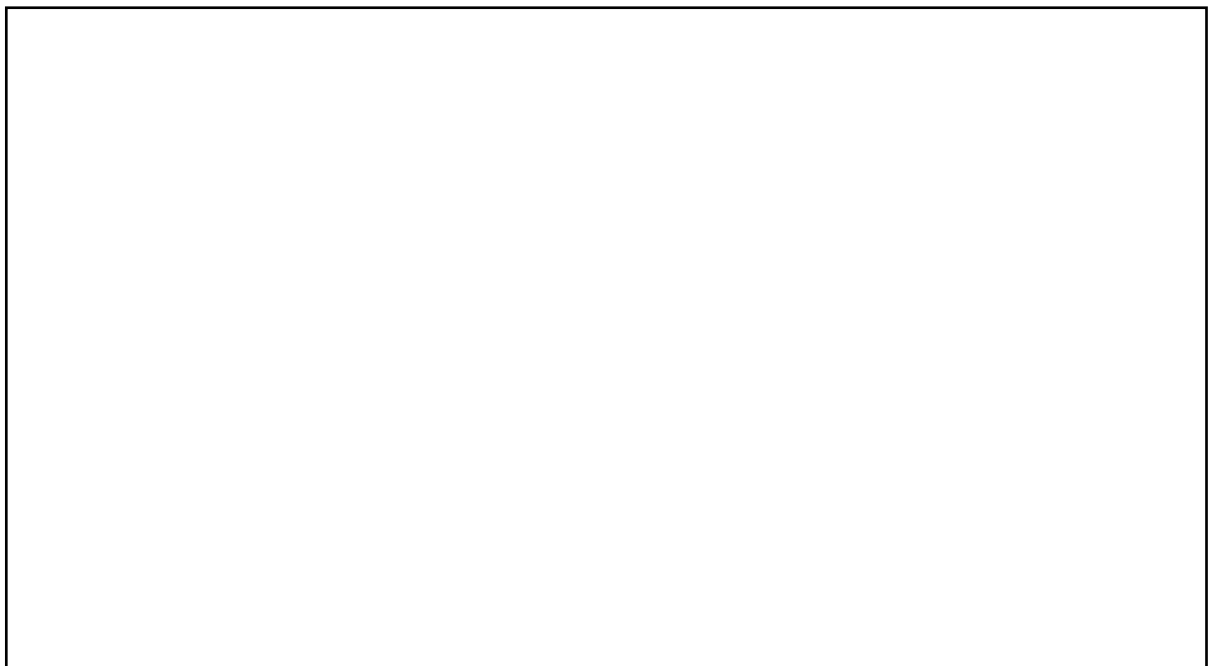
11. Infrastructure Details

| Sr.NO | Particulars | Units | Area (Aq. Feet) |
|-------|---------------------|-------|------------------|
| 1 | Office Room | | |
| 2 | Conference Hall | | |
| 3 | Administrative Area | | |
| 4 | Staff Room | | |
| 5 | Reception | | |
| 6 | Toilet | | |
| 7 | Other | | |

13.Photo to be Pasted:

SPACE FOR AFFIXING

LARGE RANGE PHOTOGRAPH SHOWING THE LOCALITY OF THE ORGANISATION



13. DD.NO _____ Date _____

Amount (in figures) 10000 /- Amount (in words) Ten Thousand only non-refundable

Declaration

I certify that the particulars furnished above or in the preceding pages are true to our best of our knowledge and express our willingness for an inspection to assess the infrastructural facilities qualified staff etc. I will abide by all the rule and regulation of Minority Open Education & Technical Board given time to time. I am ready to work under the control of the Managing Director Minority Open Education & Technical Board. I shall be the responsible, in case of any information furnished by me is found working or incomplete.

Regional Signature With Seal

For Official Use :

Regional Allotted Centre Code : _____ Date of Issue : ____/____/____
Approved Courses of the Center :

Authorized Person of MOETB

Affiliation Criteria

Any Educational Institution working for the development of Open and Distance Education can become a Regional Centre of Minority Open Education & Technical Board (MOETBM).

1. Copy of Registered Society/ Trust / Council with registration number and date.
2. Rental Agreement or Land registration copy to show ownership of Land
3. Resolution copy of trust proposed and accepted by trust/ society members in letter head.
4. Self – Declaration by the Coordinator in Rs.100 /- non-judicial stamp paper.
5. Educational Qualification of president/ Chainman/ Trustee/ Proprietor of Society/ Trust.
6. Copy of Driving License / Voter ID/ Passport /Aadhar Card of the President Chairman/ Trustee / Proprietor
7. Pan Card of the Coordinator
8. Pan Card of the Trust.
- 9 List of Teaching and Non- Teaching staff members.
10. Bio-data of all teaching Staff members.
11. Profile of the Institution in Letter head
12. Layout of the Institution
13. Rout Map of the Institution
14. Google Map Location.
15. Three Passport Size Photos of the Regional Coordinator
16. Demand Draft favouring “Minority Open Education & Technical Board” Payable at Buldana.

Self Declaration

I _____ s/o _____ certify that the particulars furnished above or in the preceding pages are true to our best of my knowledge and express my willingness for an inspection to assess the infrastructural facilities, qualified staff etc. I declare that I will abide by all the rules and directions MOETBM given from time to time. In case of any information furnished by us is found wrong or incomplete in any regard, I shall be the responsible for any decision taken by MOETBM.

I hereby undertake that I read all the policies, norms and Function of the Coordinator State and I agree with the same. I also fulfill other responsibilities informed MOETBM from time to time. I understand and agree that fees paid by me with the application form or on account of processing fee, for conduct of inspection, for grant of approval of my application or any other fee or charges, as prescribed for state information Centre once paid, will be non-refundable. Withdrawal of my proposal or rejection by the MOETBM. At any state for reason whatsoever shall not entitle me to claim any amount or compensation from the MOETBM.

I have carefully read and understood all the guidelines, specifications and other information published by the MOETBM on the website in case of any disputes or for any unforeseen issue (s) or issues not covered in the guidelines, specifications and other information published by the MOETBM the decision of the MOETBM shall be final and binding on me and all the concerned. I agree that the MOETBM reserves the right to withdraw any location or any Discipline / Programmer or its nomenclature at any time without assigning any reason and to make modification in any information published anywhere whenever deemed necessary. However I will have no right whatsoever to fight/ Challenge legally against the judgment in any court of law. All Disputes are subject to buldana jurisdiction.



Signature

Head of the Institution / Authorized Person

Date :

(Designation)

Place:.....

(Seal)