

Application for Grant of Recognition/Permission to Institutions for conducting a New Course/Enhancement of Intake under Section 14/15 of the NCTE Act, 1993

NOTE: Please refer to the instructions at page-14 before submitting the application.

DATE OF SUBMISSION _____ **APPLICATION ID** _____

1. Particulars of the authorized applicant

1.1 Name of the Applicant PRABHAT KUMAR RAI
1.2 Father's/Husband's Name SRI UMASHANKAR RAI
1.3 Occupation SOCIAL WORKER
1.4 Official Position in the Governing Body of the Society/Trust CHIEF TRUSTEE

2. Particulars of applicant Society/Trust/Body

2.1 Name of the applicant Society/Trust/Body RAMGULAM RAI RAJA DEVI CHARITABLE TRUST

2.2 Whether a copy of Certificate of Registration and MOA/ Bye-laws attached. Yes No
(Applicable in case the institution is managed by Society/Trust)

2.3 Complete Postal Address of the applicant Body.
(Strike out/ Leave blank any of the following which is not applicable)

Door/Plot Number A-33

Street Number DIVYA NAGAR

Village/Town _____

Post office KODRAGHAT

Tehsil/Taluka SADAR Town/City GORAKHPUR

District GORAKHPUR Pin Code 273001

State UTTAR PRADESH STD Code 0551

Telephone No. 2333772 Mobile No. +91 9839419283

Fax No. 2335124 E-Mail ID contact@rdmmahavidyalaya.org

Website Address www.rdmmahavidyalaya.org

3. Details about the programme/course applied for

(i)	Nature of proposal (Please tick only one choice)	- <input checked="" type="checkbox"/> First Time Recognition - Enhancement of Intake - Additional Course	
(ii)	Name of the Course applied for	B. Ed.	
(iii)	Level of the Course applied for	Graduation	
(iv)	Medium of Instruction	Hindi	
(v)	Whether Course Curriculum fulfills the duration stipulated by NCTE norms and standards	Yes	
(vi)	Mode	Distance/ Face to Face <input checked="" type="checkbox"/>	
(vii)	Intake proposed	One Unit (100)	
(viii)	Affiliating Body/University	Name	D.D.U. Gorakhpur University
		Address	Gorakhpur - 273009 U.P.
		Telephone No.	0551 - 2340363
(ix)	Normal month of commencement of the course	July	

4. Particulars of the applicant institution

4.1 Name of the Institution
(in capital letters)

RAJA DEVI MAHILA MAHAVIDYALAY

4.2 Complete Postal Address [As mentioned in the Affidavit]
(Strike out/ Leave blank any of the following which is not applicable)

Land Identification (Plot/Khasra No.) 400

Address of the Land Vill. SALLAHPUR, Tappa. Gihanti, Paragana. Salempur, Muz.

Door/Plot Number 400

Street Number SALLAHPUR

Village/Town SALLAHPUR

Post office SALLAHPUR

Tehsil/Taluka SALEMPUR Town/City BHATNI

District DEORIA Pin Code _____

State UTTAR PRADESH STD Code 0551

Telephone No. 2333772 Mobile No. +91 9839419283

Fax No. 2335124 E-Mail ID contact@rdmmahavidyalaya.org

Website Address www.rdmmahavidyalaya.org

4.3 Whether the institution is for (tick in the box)

Boys Girls Co-Ed

4.4 Whether the Institution is a Minority institution (Attach documentary proof issued by the Govt. concerned) Yes No

4.5 Type of Management (Please tick only one out of the following)

- (i) A Govt. institution
- (ii) A Govt.-aided institution
- (iii) A university department
- (iv) A deemed to be university Pvt/ Govt.
- (v) A self- financing private institution
- (vi) Any other, please specify.

(Please attach supporting documents. In case of institutions financed by Central Govt./State Govt./UT Admn. to the extent of not less than 50% of their recurring cost, a certificate to this effect from the Government concerned.)

4.6 Details of the existing Teacher Education Programmes/courses run by the same applicant Society/Trust/ Body.

Sl. No	Name of the institution	Name of the programme	Academic session from which commenced	Existing approved intake	Regional Committee		Name of Affiliating Body	
					Recognition Order Number	Date	Name	Date of Affiliation
				N.A.				

4.7 Details of courses other than Teacher Education Programme if any, run by the same applicant Society/ Trust/ Body.

Sl. No.	Name of the institution	Name of the course/programme	Level of the course	Duration of the course	Year of starting of the course	Affiliating Body	
						Name	Date of Affiliation

5. Fees and Funds

5.1 Details of cost of application form of Rs. 1000/-
(not applicable in case of application submitted online)

Draft Number	009553
Date	22.04.2008
Name of the Nationalized Bank	Central Bank of India
Name of the Branch	Khorilari Rambur
Address	Khorilari Rambur, Deoria -274701
Receipt Number, if purchased	

5.2. Details of Processing Fee of Rs. 40,000/- only

Draft Number	009551				
Date	22.04.2008				
Name of the Nationalized Bank	Central Bank of India				
Name of the Branch	Khorilari Rambur, Deoria				
Address	Khorilari Rambur, Deoria -274701				
Has the DD will enclosed in original	<table border="1"> <tr> <td>Y</td> <td><input checked="" type="checkbox"/></td> <td>N</td> <td><input type="checkbox"/></td> </tr> </table>	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>
Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>		

(Please see Rule 9 of NCTE Rules, 1997 in terms of which Government Institutions are exempt from payment of processing fee)

5.3 Details of the Endowment fund (self-financed institutions/programmes)?
(Please see Clause 10 (1) of the NCTE (Recognition Norms and Procedure) Regulations, 2007 published on 10.12.2007)

(i) Particulars of the Endowment fund (to be filled in the case of self-financed institutions/ programmes)?

Amount of Endowment Fund	500000 = 00				
Fixed Deposit Receipt Number	J-517514				
Duration of the FDR (Minimum five years)	Five Years				
Date of issue	23.04.2008				
Name of the Nationalized Bank	Central Bank of India				
Full address	Khorilari Rambur, Deoria -274701				
Phone numbers.					
Has the FDR been enclosed in original	<table border="1"> <tr> <td>Y</td> <td><input checked="" type="checkbox"/></td> <td>N</td> <td><input type="checkbox"/></td> </tr> </table>	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>
Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>		

- (ii) Particulars of the reserve fund (to be filled in the case of self-financed institutions/ programmes)?

Amount of Reserve Fund	300000.00
Fixed Deposit Receipt Number	J 517515
Duration of the FDR (Minimum five years)	Five Years
Date of issue	23.04.2008
Name of the Nationalized Bank	Central Bank of India
Full address	Khorilari Rampur, Deoria-274701
Phone numbers.	
Has the FDR been enclosed in original	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>

6. Details of Infrastructural Facilities available for proposed programme/course

- (i) Area of the land in possession (in sq. mts.) 50 | 60 | 00
- (ii) Built up area earmarked for the course (in sq. mts.) 24 | 28 | 00
- (iii) Whether an affidavit on Rs. 100/- stamp paper duly attested by Notary / Oath Commissioner on the prescribed format as required under Clause 8(8) of the NCTE Regulations, 2007 has been submitted. Yes No
- (iv) Whether certified copies of land ownership/lease documents are enclosed as per Regulation 8(8) of the Regulations, 2007 Yes No
- (v) Whether English Version of Land Ownership/Lease Documents, duly Notarized are enclosed Yes No
- (vi) Whether copy of approved building plan is enclosed. Yes No
- (vii) Whether copy of building completion certificate is enclosed, in case building is constructed Yes No
- (viii) Whether the building constructed is proposed to be constructed in the same land as indicated in col. 4.2 Yes No

6.1 Building

(Please refer to Clause 8 of NCTE (Recognition Norms and Procedure) Regulations, 2007)

Description	To be filled in by Institution																
i) Date of approval of the Building plan by the competent authority/State Govt.	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>3</td><td>0</td><td>1</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	1	3	0	1	2	0	0	8
D	D	M	M	Y	Y	Y	Y										
1	3	0	1	2	0	0	8										
ii) Date of completion of construction of the building, if already completed	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>2</td><td>6</td><td>0</td><td>4</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	2	6	0	4	2	0	0	8
D	D	M	M	Y	Y	Y	Y										
2	6	0	4	2	0	0	8										
iii) If construction of the building is not complete, the likely date of completion of construction	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> N.A.	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y										
iv) Name and address of the competent authority for approval of building plan and issue of completion certificate	Gram Pradhan, Sallahpur, Deoria.																
v) Whether completion certificate obtained from the competent authority	<input checked="" type="checkbox"/> Y/N																
vi) Whether Bldg. disabled –friendly as per relevant laws.	<input checked="" type="checkbox"/> Y/N																
vii) Whether fire safety norms are being followed.	<input checked="" type="checkbox"/> Y/N																
viii) Total Built up Area (in sq. meter) (in sq.ft.)	<table border="1"> <tr> <td></td><td>2</td><td>4</td><td>2</td><td>8</td><td>.00</td> </tr> <tr> <td></td><td>2</td><td>6</td><td>1</td><td>1</td><td>.00</td> </tr> </table>		2	4	2	8	.00		2	6	1	1	.00				
	2	4	2	8	.00												
	2	6	1	1	.00												

6.2 Specification of Rooms and other infrastructural facilities

S.No.	Description	Room No.	Length In meter	Breadth In meter	Carpet area in sq. meter
1	2	3	4	5	6
1	Class Room	1	10.56	8.23	86.90
2	Class Room	1	10.56	8.23	86.90
3	Multipurpose Hall	1	21.37	8.23	175.88

S.No.	Description	Room No.	Length In meter	Breadth In meter	Carpet area in sq. meter
1	2	3	4	5	6
4	Multipurpose Room	1	10.56	8.23	86.90
5	Seminar room/tutorial room	1	7.32	8.23	60.24
6	Library	1	10.56	8.23	86.90
7	Principal Room	1	8.23	3.66	30.12
8	Administrative office	1	8.23	7.39	60.82
9	Store Room	1	8.23	4.57	37.61
10	Sports Store Room	1	8.23	3.66	30.12
11	Girls Common Room	1	7.32	8.23	60.24
12	Boys Common Room		—	—	—
13	Art & Crafts Room	1	8.23	3.66	30.12
14	Music Room	1	8.23	5.79	47.65
15	Socially Useful Productive Work (SUPW) Room	1	7.32	8.23	60.24
16	Science Lab1	1	10.56	8.23	86.90
17	Science Lab2		—	—	—
18	Psychology lab	1	10.56	8.23	86.90
19	Educational Technology (ET) /ICT Lab	1	10.56	8.23	86.90
20	Workshop	1	7.32	8.23	60.24
21	Any other Room/Hall	1	7.32	8.23	60.24
22	Toilets				
	(i) Male	1	3.05	2.44	7.44
	(ii) Female	1	3.05	3.66	11.16
23	Any other facility may be specified				

7. Instructional Facilities

7.1 Library
Total number of Books

*We will arrange books before
[] [] [] [] []
inspection.*

7.2 Manpower

7.2.1 Academic and Non-Academic Staff (Applicable for existing institutions)

7.2.1.1 Details of Academic Posts available at present

Name of the Post	Number of Post	Pay Scale	No. of Filled Posts	No. of Vacant Posts

7.2.1.2 Details of Non-Academic Staff available at present

Name of the Post	Number of Post	Pay Scale	No. of Filled Posts	No. of Vacant Posts


8. Arrangement for Games and Sports

8.1 Details of availability of playgrounds

Sl. No.	Number of Playgrounds	Length in meter	Breadth in meter	Area in sq mt.
1	01	72.32	53.93	3900.00

(Signature of the authorized designated authority giving undertaking alongwith his/her official and position office Seal)

Undertaking


प्रबन्धक/मन्त्री
राजा देवी महिला महाविद्यालय
सल्लरपुर, भटनी, देवास (उ० प्र०)

That I have read and understood the contents of the application and the same are true and correct on the basis of my personal knowledge and on the basis of records of the institution.

2. In connection with my/our application for grant of recognition/permission of RAJA DEVI MAHILA MAHAVIDYALAY (Name of the Institution) to conduct B.Ed. course with One Unit intake/additional intake, and hereby undertake to comply with the following:-

- (i) That infrastructural, instructional and other facilities has been/shall be provided as per the NCTE norms, standards and guidelines prescribed from time to time.
- (ii) That admission to the Course will be made only after recognition is granted by the concerned Regional Committee of the NCTE and affiliation is granted by the concerned University/Affiliating Body.
- (iii) That admission of students, satisfying the eligibility conditions will be made either on the basis of marks obtained in the qualifying examination or in the entrance examination conducted by the State Govt./University as per its policy.
- (iv) That there shall be reservation of seats for SC/ST/OBC/handicapped etc. as per the Policy of State Govt.
- (v) That the supporting and other staff will be appointed as per the guidelines of the State Govt./the affiliating University.
- (vi) That the tuition and other fees will be charged at rates prescribed by the concerned state Govt./affiliating University.

- (vii) That the academic and other staff of the institution (including part time staff) shall be paid such salary as may be prescribed by the concerned State Govt./University from time to time.
- (viii) That the Management shall discharge the statutory obligations relating to provident fund, pension, gratuity etc. in respect of all its employees.
- (ix) That the Management will make adequate funds available for providing satisfactory facilities and for proper programme implementation.
- (x) That the accounts of the institution will be properly maintained and audited annually by the audit authorities or a Chartered Accountant, and will be open for inspection.
- (xi) That the Management will strictly follow all conditions and norms prescribed by NCTE from time to time, conduct the programme in all earnestness, and submit itself to inspection by the NCTE.
- (xii) In the event of non-compliance by the Ramgulambai Raja Devi Charitable Trust (Name of the Society/Trustee/College/ Institution etc.) with regard to the norms and standards and any other condition laid down/prescribed by the NCTE from time to time, the NCTE or a body or a person authorized by it will be free to take all necessary measures for effecting withdrawal of its recognition or permission, without consideration of any other issue, and that all liabilities arising out of such a withdrawal would solely be that of the Institution/Management.
- (xiii) That the Management will not cause or allow discontinuation of the Course in any year or for any batch after grant of recognition, and that where compelled to do so, it will seek the concurrence of NCTE for discontinuation on the completion of the year/batch.
- (xiv) The (College/Institution) by virtue of the approval given by the NCTE shall not automatically become claimant of any financial grant or assistance from the Central or State Govt., or support from the NCTE.



(Signature of the authorized designated authority alongwith his/her official position office Seal)

Place: GORAKHPUR

Date: 30.04.2008

प्रबन्धक/मन्त्री
राजा देवी महिला महाविद्यालय
सल्लहपुर, भदनी, दे. प्रो.
NAME IN BLOCK-LETTERS
PRABHAT KUMAR RAI

सभी स्थानीय शाखाओं पर सममूल्य पर देय PAYABLE AT PAR AT ALL LOCAL BRANCHES

अल्फा कोड क्र. ALPHA CODE NO.

K H O R I L

दिनांक / Date 22/04/2008

खोरीलारी रामपुर - 274 701 (उ.प्र.)
ISSUING BRANCH KHORILARI RAMPUR - 274 701 (U.P.)

मांगे जानेपर ON DEMAND PAY Member Secretary, N.C.T.E., Jaipur
या उनके आदेशपर OR ORDER

रुपये RUPEES One thousand only — र. Rs. * * 1 0 0 0 प. P. * *
अदा करें

मूल्य प्राप्त VALUE RECEIVED

N-841
ह.न.क्र.

[Signature]
प्राधिकृत हस्ताक्षर

टीपल TL
ओएल OL
ओटी OT



A
Jaipur - N 80
अदाकर्ता शाखा / DRAWEE BRANCH

अ.क्र./SR. NO.

20/00018

[Signature]
S. S. Nos. AUTHORIZED SIGNATORIES

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009553 000016000

16

[Signature]
प्रबन्धक/मन्त्री
राजा देवी महिला महाविद्यालय
सल्लहपुर, भटनी, देवरिया (उ० प्र०)

सभी स्थानीय शाखाओं पर सममूल्य पर देय PAYABLE AT PAR AT ALL LOCAL BRANCHES

जारी करने वाली शाखा
ISSUING BRANCH

खोरीलारी रामपुर - 274 701 (उ.प्र.)
KHORILARI RAMPUR - 274 701 (U.P.)

अल्फा कोड क्र. ALPHA CODE NO.

K H O R I L

दिनांक / Date

22/04/2008

मांगे जानेपर ON DEMAND PAY

सेक्टर सेक्रेटरी एन. सी. ई. जयपुर -

या उनके आदेशपर OR ORDER

रुपये RUPEES

चालीस हजार के मा. 1/2

रु. Rs. 40000

अदा/करें मूल्य प्राप्त VALUE RECEIVED

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शेन्ट्रल बैंक ऑफ इंडिया
A जयपुर (ए.पी.का)

अ.क्र./SR. NO.

20/000116

अदाकर्ता शाखा / DRAWEE BRANCH

ह.म.क्र.

P-2330

S. S. Nos.

प्राधिकृत हस्ताक्षर

AUTHORISED SIGNATORIES

00955 0000160000

16

Sudhakar Kumar
प्रबन्धक/मन्त्री
राजा देवी महिला महाविद्यालय
सल्लहपुर, भटनी, देवरिया (उ० प्र०)

भारतीय गैर न्यायिक

एक सौ रुपये

Rs. 100

₹. 100

ONE HUNDRED RUPEES

ONE

12 OCT 2015

भारत INDIA

INDIAN NON JUDICIAL

Notary, Gorakhpur

उत्तर प्रदेश UTTAR PRADESH

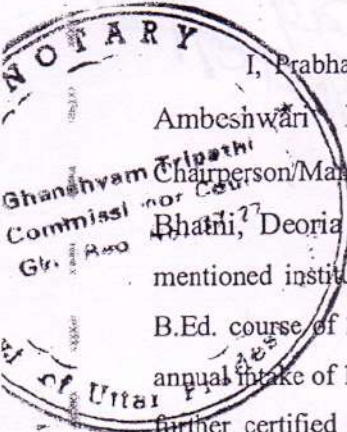
CR 571394

Affidavit

I, Prabhat Kumar Rai, Son of Uma Shankar Rai, Resident of Flat No.-103, Block-A, Ambeshwari Paradise, H.P. Dubey Marg, Betiyahata, Gorakhpur U.P. and Chairperson/Manager/Secretary/Correspondent of Raja Devi Mahila Mahavidyalay, Sallahpur, Bhatni, Deoria U.P. Certify that I have been authorized by the Management of the above mentioned institution to give this Affidavit on behalf of the institution, within at present offers B.Ed. course of 2 year duration (File Code No. F.No./NRC/NCTE/UP-2996/2015/110309 with an annual intake of 100 for two basic units of 50 students each from academic session 2015-2016). It is further certified that the Management has studied the National Council for Teacher Education (Recognition Norms and Procedure) Regulations, 2014 carefully and has understood their implications for the existing Teacher Education Institutions offering NCTE recognized teacher education programme(s).

2. In convey my willingness for two units of the Existing B.Ed. course

3. Further, I have been authorized by the Management to state that the institution shall fulfill the revised Norms relating to infrastructure, instructional facilities, enhanced amount of Endowment and Reserve Funds, Number and qualifications of Teaching Staff, Curriculum and implementation strategies, in view of the change in duration / intake of the programme(s) offered in the institution within the time limit allowed by NCTE.



Prabhat Kumar Rai
 Signature of the affiant

Prabhat Kumar Rai
 Signature
 Prabhat Kumar Rai
 Manager

Place: Gorakhpur

Date: