



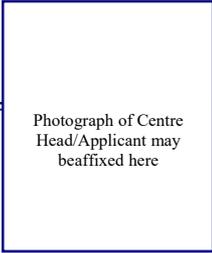
ABC SKILL DEVELOPMENT COUNCIL

Recognized by Govt. of India
IAF Accredited An ISO 9001:2015 Certified Educational Organization
Registered under MSME and Ministry of Corporate Affairs
(CIN No- U85300AS2022NPL022950)

“A National Programme of Information Technology Education and Skill Development”

APPLICATION FOR CENTRE AUTHORIZATION

(Use Capital Letters only)



Photograph of Centre Head/Applicant may be affixed here

1. Name of Centre/Institutions/Organizations/NGO _____

2. Name of Owner/President/Director _____

S/o, D/o, W/o _____ D.O.B _____

3. Address of Centre/Institutions/Organizations/NGO

Near _____

Village/Town/City _____ P.O. _____

Police Station _____ Dist _____

State _____ Pin Code _____ Mobile No/s _____

Active Email Address/s _____ Whatsapp Mobile No _____

4. Correspondence/Postal Address of Institutions/Organizations/NGO

5. Near _____

Village/Town/City _____ P.O. _____

Police Station _____ Dist _____

State _____ Pin Code _____ Mobile No/s _____

Active Email Address/s _____ Whatsapp Mobile No _____

6. Date Opening Centre/Institutions/Organizations/NGO _____

7. Centre/Institution/Organization Type (Tick ✓) i. Newly Open _____ ii) Running _____

8. Detail of Centre Infrastructure/Machinery/Equipment.

[A] No. of Computers/Machines (Required Min. 3 to 5) _____ [B] No. of Chairs (Required Min.10) _____

[C] Centre Area (Required Min. 100 Sq feet to 200 Sq feet) _____ [D] Toilet/Urinal available (Yes/No) _____

[E] Scanner(Y/N) _____ [F] Printer (color/B&W) _____ [G] Internet Connectivity (Y/N) _____ [H] UPS/Inverter (Y/N) _____

9. Number of Faculty Members (Required Min-1).

Sr.No.	Name	Qualification

10. Applying for Centre Authorization of below Mentioned Category/s (Tick on Require Category)

Software	Hardware	Teacher Training	Vocational	All
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11. Authorization Fee –Payment Details

Centre Affiliation Fee	Payment Date	Paid by NEFT, Online/Mobile Banking	Bank Name	Payment Slip No.

Signature of Centre Head	Left thumb Impression of Centre Head	Date of Submission	Place

Centre Head/Owner/Director Profile

Centre Head Name		
Centre Head Father/Husband Name		
Date of Birth		Centre Head / Owner Color Photo (Background Single Colour with Best Quality)
Religion		
Gender (Male/Female)		
Language Known		
Centre Head Permanent Address (Street/Sector/Village, Post Office, Police Station /City, District, State, Pin Code)		
Qualifications (Attach Copies of Certificates)		
Experience (If any)		
Active Email-ID (Official)		
Centre Mobile Numbers (Provide At least two Active Numbers)		
Centre Head Whats App Mobile No.		
Centre Head Active Email IDs		

Signature of Centre Head	Left thumb Impression of Centre Head	Date of Submission	Place

Declaration by Centre Head/Owner/Director

I/We.....S/o,D/o,W/o.....
 Aged..... **Permanent Address** (*Mention Vill, P.O., P.S, Dist, State, Pin Code*)

**Pin Code**.....
 Mob..... **Email ID**.....

Solemnly Affirm & Declare As Under:

1. That I/We, have established/opened Centre at _____

2. Name of my/our centre is _____
3. That I/We, have established/opened above mentioned Centre/Institute/NGO on (date) _____.
4. That I/We have fulfilled all requirements to run (**Software Courses/Hardware Courses/Instructor Training Courses/Vocational Courses/All Courses**) _____ Course/s outside of formal education under ABC SKILL Development Council (Under National Programme of I.T. Education and Skill Development) in my/our centre/Institute/NGO.
5. That ABC SKILL shall issue authorization to run above mentioned Category/s courses, for above mentioned single location/address of my/our centre & the same authorization shall not applicable to my/our franchise/branch at different locations, for this, I/we shall separately submit new application for centre authorization for that franchise/branch at different location/address.
6. That I/We shall remain liable for every due towards ABC SKILL in every circumstance.
7. That ABC SKILL has no sharing in student Admission fee/tuition fee/exam fee & all said fees will be prescribed/decided by me/us in my/our centre as per investment, infrastructure facilities, student & teacher ratio, backwardness & geographical condition of my/our area. ABC SKILL shall not be held responsible if any dispute arises for said fees & I/We shall be solely liable for the same. ABC SKILL shall charge onetime nominal registration fee and Documentation Fee as per the duration of course/s per student/s.
8. That ABC SKILL shall not invest/has not invested in my center/Institute set up, So all Investments, expenses and formalities relating to operation of my/our centre shall be managed & borne by me/us such as- computer systems, centre furniture, centre teacher's salary, centre building (rented/self owned), educational legal Software, Centre Audit, Centre ITR, Centre Taxes (all types), local level NOC etc.
9. That I/We shall get student/s diploma/certificate via post at my/our centre/postal address, which are certified/issued outside formal education Under National Programme of I.T. Education and Skill Development of ABC SKILL.
10. That all types of payments paid, to be paid to ABC SKILL, shall not be refundable in any case, whatsoever.
11. That ABC SKILL shall not be liable for any commitment or any scheme or any advertisement or tie-up, with students, govt., corporate, universities, public & other organizations of same nature, which I/We run on my/our personal level in my/our centre.
12. That I/We found involve in any criminal, financial, social or any other offence then the authorization of my/our centre shall automatically come to an end.
13. That the authorization of my/our centre/Institute/NGO shall be valid for 3 Years fro _____ to _____ & the same shall be renewed if I/We fulfill the condition applied for the said renewal.
14. That ABC SKILL shall have full right to update/modify/change/add, any rules & regulations pertaining to my/our centre association/authorization/activation with ABC SKILL.
15. That I/We have read and understood the rules & regulations of the ABC SKILL & accept the same. In case of infringement/non compliance by me/us, of any rules & regulations made in any application/form/document/file/webpage of www.abcskill.co.in of ABC SKILL, then, Director of ABC SKILL shall have full right to take decision upon further activation/authorization of my/our centre & in this regard, his decision shall be acceptable to me/us.

Only after complete satisfaction, this declaration is being made which can be used for legal purposes as and when necessary against me/us. In the event of any dispute/matter, it will be settled by the committee appointed by the ABC SKILL-AS & its decision will be binding on all concerned or at the court North Lakhimpur (AS) & I/we will be liable to all the expenses.

Therefore, I/we _____ Hereby declare & accept that the information furnished in this Declaration from and the information furnished in the Application for Centre Authorization & Centre head Profile for running courses outside of formal education Under National Programme of I.T. Education and Skill Development of ABC SKILL are true to the best of my/our knowledge and belief and & will remain in force, binding & acceptable on me/us, my/our successor for the period of my/our center's association with the ABC SKILL.

Signature of Declarant (Centre Head)	Left thumb Impression of (Centre Head)	Date of Declaration	Place

Note: Enclose/Attach the following documents along with this Application form:

- 1. Attach-** Centre Head/Owner/President/Director, Qualification copies, ID Proof- Aadhaar Card, Voter Card, PAN Card
- 2. Attach-** Centre Front Photo, Centre Rooms/Lab Photo (If Centre Accommodation is not ready then send said photos via email with in One Month from the date of centre authorization)
- 3.** While sending scan copies of centre application form via emailing at abc.skilldev@gmail.com. Please mention/write your centre name, centre address, postal address and mobile number in email.
- 4.** Send via email centre head/owner colored photo, because the same [will be shown at website](#).

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