|  |  |
| --- | --- |
| C:\Users\DELL\Desktop\MSBU Logo\Maharaja Surjmal logo PNG.png | egkjktk lwjtey c`t fo’ofo|ky;] HkjriqjPh. & Fax No. 05644-220560, Email- affiliation\_btp@msbrijuniversity.ac.inWebsite – www.msbrijuniversity.ac.in |

Cost of Form : **Rs. 1500/**- Session : **2019-20**

**Affiliation Form For New College**

**Name of Course(s) : ………………………………………………………………………………**

**Name of College: ………………………………………………………………………………**

**College Code : ……………… (for office use only) Email id ……………………………………...**

**Address : ………………………………………………………………………........................**

 **….......................................................................................... Pin Code ....................**

**Contact No. ………………………………… Mobile No. : ………………………….**

**Website of College: ……………………………………….**

The Registrar

Maharaja Surajmal Brij University,

Bharatpur

Dear sir/ madam,

 I have the honor to apply for Affiliation for new course(s) in the new college to the University for the Year 2019-20.

 I hereby declare that the following information furnished by me is true in my knowledge -

 **(A) Details of Management are as under :**

**Full Name of Society/Trust (With Address) …………………………………………………………**

 **………………………………………………………....**

|  |  |
| --- | --- |
| **Name of Chairperson/ Secretary/Managing Trustee :** | **…………………………………………………………****…………………………………………………………** |
| **Registration No. of Society/Trust:** | **…………………………………………………………** |

|  |  |
| --- | --- |
| **Contact No. 1:** | **Contact No. 2 :** |
| **A/C No.**  | **Name of Acct. Holder -** |
| **Name of Bank -** | **Name of Branch -** |
| **IFSC Code -**  | **A/C opened on -** |
| **Authorized Signatory’s Name –** | **Designation –** |

**(B) Details of NOC:**

**Whether the NOC has been issued by the State Govt. for the session 2019-20? Yes No**

**If Yes, Letter No. of State Govt. NOC…………………………Date of State Govt. NOC…………...**

**Whether the NOC has been issued by the NCTE/BCI for the session 2019-20? Yes No N.A.**

**If Yes, Letter No. of NCTE/BCI NOC…………………………………….. Letter Date……………**

**(C) Details of Affiliation fees deposited :**

|  |  |  |
| --- | --- | --- |
| **Affiliation Fee :**  | **Inspection Fee:**  | **Cost of Form :**  |
| **Late Fee :**  | **Penalty :**  | **Total Amount :** |
| **D.D. No.**  | **Date :**  | **Name of Bank :** |

**(D) Details of Course(s) in which Affiliation Sought :**

 **Name of the Proposed College :**

|  |  |  |
| --- | --- | --- |
| **Name of Course** | **Name of Subject** | **No. of Seats Sought** |
|  |  |  |
|  |  |  |
|  |  |  |

**Name of the Principal : …………………………………………….. Contact No. : ………………….......**

**Proposed additional Staff :**

|  |  |  |  |
| --- | --- | --- | --- |
| **Teaching** | **Clerks** | **Lab Staff** | **Class IV** |
|  |  |  |  |

|  |  |
| --- | --- |
| **Land Area of College (Sq. Mtrs)** |  |
| **Covered Area (Sq. Mtrs)**  |  |
| **No. of Rooms**  |  |
| **Total Seating Capacity No. of Labs** |  |
| **Total Working Capacity** |  |
| **Owner’s Name** |  |
| **Need/Justification of Course :** |  |

**List of Enclosures:**

|  |  |  |
| --- | --- | --- |
| **S. No.** | **Type of Document** | **Document** |
| **1.** |  |  |
| **2.** |  |  |
| **3.** |  |  |
| **4.** |  |  |
| **5.** |  |  |
| **6.** |  |  |
| **7.** |  |  |
| **8.** |  |  |

 **I hereby undertake that I shall abide by provisions/directions of the State Govt./MSBU Bharatpur/UGC/ NCTE /BCI. An affidavit in this regard is enclosed herewith duly attested by the Notary Public**.

Enclosed : Affidavit

Place : Signature of the Applicant

Date : (With Office Seal)