



# iiel<sup>®</sup> Mission

Indian Institute of E Learning Mission  
(SMILE Computer Education)

Please  
affix your  
passport size  
photograph  
here and  
signature in

- Regd. By State Govt. U.S.Act. 21,1860
- Auth. Study Centre of **Periyar University** (PRIDE), Tamilnadu for University Program **Regd. No. 1633**
- Approved as **MINI ITI (VTP)** by Directorate General of Employment & Training (DGET), RDAT, NCVT Ministry of Labour & Employment Government of India **Regd. No. 209360039**
- Approved as a Accredited Vocational Institute (AVI) of **NIOS** for Vocational Course **Regd. No. 710241**
- Registered as 'Facilitation Centre' for **CCC & BCC** Reg. **No. 88000624** and 'Accredited Institute' to conduct training for '**O' Level** by NIELIT (DOEACC) Ministry of Communication and Information Technology, Govt. of India India Reg. No. "**O**"**2158**

## Application form for Facilitation Centre

### 1- Applicant Institute Information

- a. Name of Institute.....
- b. Address.....
- Tehsil..... City..... District.....
- State..... Pin Code.....

### 2- Contact Details (Ph. & Mob. & e-mail With STD Code)

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### 3- Brief Description of Activities Conducted by institute(Education & Non Education/ Commercial) with running course

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### 4- Details of Head/Owner of Institute

- a. Full Name .....
- b. Father Name .....
- c. Date of Birth .....
- d. Qualification .....
- e. Address .....
- Tehsil..... City..... District.....
- State..... Pin Code.....
- Contact Details (Ph. & Mob. & e-mail With STD Code).....
- .....

### 5- Details of Payment : Method of Payment Cash/Cheque/DD.....

(Note The DD/Cheque should be drawn in favor of IIEL payable at Jhansi)

Details of DD/Cheque (Bank Name.....

DD/Cheque No..... Amount..... Draw Date.....

**6- Details of Infrastructure of applicant Institute :**

- a. Premises(Owned/Rented/Leased) .....
- b. Total Area (in sqrt. Feet.).....
- c. Counseling & Administrative Area.....
- d. Class Room.....
- e. Practical Lab.....
- f. Staff Room.....
- g. Library Books.....No. of Books.....
- h. UPS Capacity..... And Battery.....Generator.....

**7. Computer & Printer & other Facilities of Institute :**

s.no	CPU Type	RAM	Hard disk	Monitor type & Size	Other

(for additional information please attach separate sheet)

**8. Local area network, Internet, Peripherals facilities of Institute :**

- a. Ethernet (Hub/Switch) ..... Modem.....
- c. Internet through (Dial Up/Broad Band/Mobile/etc.).....

**9. Licensed Software Availability :**

- a. Operating System :.....
- b. Office Automation Software/Accounting Software/Graphics Software/Media Software etc.  
.....
- c. Anti Virus Software.....

**10. Human Resource Appointed in the Institute :**

- a. Centre Coordinator (Centre Head)

Name.....  
Designation..... Date of Birth :.....  
Academic Qualification :..... Professional Qualification .....  
Working Experience..... Contact No..... e mail.....

**b. Faculty (teaching Member)**

Name.....  
Designation..... Date of Birth :.....  
Academic Qualification :..... Professional Qualification .....  
Working Experience..... Contact No..... e mail.....

**c. Faculty (Teaching Member)**

Name.....  
Designation..... Date of Birth :.....  
Academic Qualification :..... Professional Qualification .....  
Working Experience..... Contact No..... e mail.....

**e. Counselor**

Name.....  
Designation..... Date of Birth :.....  
Academic Qualification :..... Professional Qualification .....  
Working Experience..... Contact No..... e mail.....

**f. Marketing Executive**

Name.....  
Designation..... Date of Birth :.....  
Academic Qualification :..... Professional Qualification .....  
Working Experience..... Contact No..... e mail.....

**11. Declare by Applicant Institute**

i/we .....wish to apply to register our center as the study & Information centre of IIEL Mission courses at our above mentioned premises. We assure you that all the information is maintained above is true. If it found wrong so company has full right to cancel our institute registration. I have carefully read and understand all the rules and regulation of IIEL Mission.

**Seal & Signature**  
**Regional Head**

**Seal & Signature**  
**Institute Head/owner**