

Centre for Distance & Open Learning (CDOL) Jamia Millia Islamia (JMI)

Application Form for Establishing a Study Centre

General Instructions

1.	All the columns must be fille	ed un in legible handwriti	ng Incomplete applications					
1.	may be rejected.	ed up in legible handwitth	ig. incomplete applications					
2.	Certified copies of all the relevant documents as per the check list given at the end of this form should be enclosed with the application form.							
Annlica	ation For: New Study Centre	• •						
прпо		r:	Application No. : Processing Fee :					
A.	GENERAL INFORMATION A	ABOUT THE INSTITUTE						
1.	Name of Institute							
2.	Postal Address							
3.	Phone No. with STD Code Mobile No							
4.	FAX No	Email						
5.	Location of Institution- Ru	ıral Urban Se	mi-urban					
S.No.		Name	Distance in Km.					
1.	Nearest Police Station							
2.	Nearest Nationalized Bank							
3.	Nearest Railway Station							
4.	Nearest Airport							
6.	What are the courses that	the institution at presen	t is offering.					
S.No.	Under Graduate	Post Graduate	Diploma & Certificate					
-								

Details of Processing Fee of Rs. 20,000/-
Demand Draft No Date Name of the Bank
INFORMATION ABOUT THE UNIVERSITY OR SOCIETY/TRUST RUNNING THE INSTITUTION.
Name and address of Trust/Society/University
Is the Trust/Society Registered? YES/NO If yes, under which Act?
Year of Registration/Affiliation Registration No./Affiliation No
(Certified copy of the Certificate of Registration and Memorandum of the Society is
to be enclosed. Enclosure-I).
Period up to which Registration/affliation of Trust/Society/college is valid
Name & official address of the Manager/President/Chairman/Head of the
Institution
Name:
Designation:
Address:
Phone No. with STD Code :
Mobile Number :
E-mail-ID:
Infrastructural & academic facilities
Is the Institution located in a rented building or own building?
Physical Size (Land documents to be enclosed. Enclosure-II)
a) Area of Institution Campus (in Acres.) (in sq.Mtrs.)
b) Built up Area in (in sq.Mts.)

Rooms, Library and Laboratories (Lay out plan of the Institution to be enclosed. **Enclosure-III**).

SI. No.	Type of Room	Size in Sq. Ft.	Seating/Using Capacity	No. of Such rooms	Availability on weekends/off hours/holidays (Y/N)	Programme (DM) for which allocated
1	Class Rooms					
2	Conference Room					
3	Library (Reading Room if any)					
4	Computer Lab					
5	Office/Staff Room					
6	Canteen/Cafterea (if any)					
7	Other Labs (if aplicable). For DEE, B.Ed, PGDGI					
8	Any other Kindly Mention					

17. **Faculty/Resource Persons** (List of Faculty indicating qualifications, subject(s) taught & experience etc. to be enclosed. **Enclosure-IV**).

Sl. No.	Name Faculty Member/ Resource Person	Designation and Subject area	Highest Qualification	In-house or Outsourced (I/O)	CV Attached (Y/N)	Consent/joining letter attached (Y/N)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Attach Additional Sheet if Required

18.	Administrative	support	staff	(List	indicating	$\it qualification$	experience,	etc.
	Enclosure -V).							

	Sl. No.	Staff	Name	Highest Qualification
	1.	Program Coordinator (one for each programme applied)		
	2.	Clerks		
	3.	Lab Attendants		
	4.	Librarian		
	5.	Peons		
19.	Other I	acilities		<u> </u>
	a) Faci	lity of Toilets Available	Not	Available
	b) Faci	lity of Drinking Water Available	Not	Available
	c) Fire	Safety Measures Available	Not	Available
	d) Is th	nere a certificate about health and sanitary con	ditions, drin	king water and
	fire	safety of the institution, obtained from the co	mpetent au	thorities of the
	area	ı. YES /	NO	
	e) If ye	es please attach copy of the same		
20.	Library	Facilities (Give information programme wi	se)	
	a) Is th	ere a Librarian in the institution. YES /	' NO	
	b) Prog	gramme applied for (Give detail of books	/journals r	elated to the
	prog	gramme)		
	Title N	os. Volumes Nos. Ma	agazine/Jour	nals Nos.
21.	Other I	Facilities available in the Institution (if any)		
	Sports	& Game Dance Room Gymnasiu	m Mu	isic Room

Health and Medical Check up [

Hostel

22.		ator Backup in the	campus in case of e	lectricity interruption					
23.	YES / NO.	ICT facilities availa	ahla in tha instituti	on					
23.	Television	VCR/VCP VCR	Audio Cassettes						
	Multimedia Co	mputers I	nternet Facilities	Wifi connection					
	CCTV enabled Does the instit	ute has its own wel	osite. Yes/No If yes						
24.	Whether venti	lation and lighting	is enough in the cla	ssrooms YES/NO					
25.	Llibraries YES	/NO and laboratorio	es YES/NO						
D.	SUITABILITY F	OR CONDUCTING P	UBLIC EXAMINATION	ON					
26.	Is the Instituti	on fit for conductin	g public examinatio	ons? YES / NO					
27.	If so, specify th	e following details	(for how many stu	dents in one sitting)					
	a) Availability of sufficient furniture Number :								
	b) Availability of security arrangements Number :								
	c) Availability of invigilators Numbers :								
	d) Existence of	boundary wall with g	gate : Y	TES NO					
E.	FINANCIAL STATUS OF THE INSTITUTION								
28.	Details of Income and Expenditure (Audited reports of last 3 years to be								
	enclosed. Enclo	sure-VI).							
Sl. No	o. Year	Income (in Rs.)	Expenditure (in Rs.)	Sources of Income					
29.	Does the ap	olying Institution	receive any grai	nt from the Govt. of					
	India/State Go	vt./Union Territory	y or any other sour	ce? YES / NO					
30.	If so, please provide detailed information of the nature of grant and the								
		су							
	- 3								

F.	OTHER RELEVANT INFORMATION								
31.	What are the working hours of the applying institutions . Day Time								
32. Will the library and other facilities be available to the CDOL, JMI lea						s as and			
	when red	quired? Yes/N	No						
33.	ed for) be ava	ilable to							
	the CDOL, JMI students as and when required. Yes/No								
34.	When does the Applying Institution propose to hold CDOL, JMI, Counselling								
	Session?								
35.	Status o	f Students alı	ready studying in you	r Institution:	S:				
	Sl. No.	. Course	Mode Distance/Regular	Strength o	of Students	Total			
				Boys	Girls				
36.	Express in a few lines – Why does the applying Institution want to be associated with CDOL, JMI.								
	,		DECLARATION above information fur best of my knowledge.	nished regard	ding the Insti	tution is			
Date :									
Place :			(Signature of th	-					
			(Name with R	uvver stamp) .					

CHECK LIST FOR ENCLOSURES

(Duly attested copies are to be attached by an applicant institution)

S. No.	Particulars of the Document	Whether enclosed or not please tick	Remarks (If any)
1.	Application Form Fee of Rs 1000/- (One thousand) and Processing fee of Rs. 20,000/- (Twenty thousand) in the form of Demand Drafts drawn in favour of Jamia Millia Islamia		
2.	Copy of the Certificate of Registration Society, Copy of the Memorandum of Association and Rules and Regulations, List of members of the Governing Body of the Society with their occupations and addresses (if applicable).		
5.	Copy of the letter of affiliation from the University (if applicable).		
6.	Copy of Audited Statement of income and expenditure of the Society for the past three years (if any).		
7.	List of Faculty Member indicating their expertise, qualifications, designations, experience, length of service, who are associated with the institution or who have given their consent to work with if required a weekend and off hours.		
8.	Photographs of the libraries, laboratories/ classrooms and building of the Institution.		
9.	Documents of Land of the Institution or Rent agreement (if applicable), lease/ownership (if applicable).		
10.	Layout plan of the building of the Institution.		

NOTE: All the required above cited applicable documents must be submitted along with the application otherwise the application may not be considered.