



(Government Recognised)

Board of School & Technical Education (C.G.)

विद्यालय एवं तकनीकी शिक्षा बोर्ड (छ.ग.)

State Co-ordinator Form

Following Documents To Be Attach With Application Form:

- Registration Certificate and Memorandum of Association of Society, or Company or Trust Deed or Resolution of Society or Trust or Approval Letter.
- Company for becoming BSTE, CG – State Coordinator.
- Audited Balance Sheet of previous three years.
- One Photograph, Head of the Institution.
- Copy of the PAN Card of the proposed State Coordinator.
- Proof of Qualification of Head of the Institution.
- Profile of the Proposed State Coordinator.
- Six months Bank Account Statement.
- List of all staff members working for proposed State Information Center.
- Undertaking (to be typed in Rs.100/- Indian Non-Judicial paper) duly Attested by Notary.
- Enclose the List of Institutes / Centers / Individuals associated with you in your State.
- Address Declaration on the letter head of the Organization
- Proof of Address should be attached along with Application Form (Telephone Bill/ Electricity Bill / Rent Deed / Sale Deed)

Note : After 15 Days of Completion of all these Documents State Information Center will be declared

To,
The Secretary
Board of School & Technical Education
Chhattisgarh

Dear Sir,

We wish to take State Information Centre of the board there by we are submitting this application form. We certify that we have very well understood our responsibilities and the implications of the scheme. We undertake to follow all the instructions issued by the board from time to time. We also assure to follow all the rules and regulations, terms, conditions, norms and function of the State Co-ordinator of board. We further assure you to that we will try our level best to provide quality education to fulfill the objectives of the board.

Authorized Signatory of the :

Institution Society/Trust/Company

Name: Name:

Designation..... Designation.....

Signature & Seal with date:

Signature & Seal with date

Note: This letter must be typed / photocopied on the letterhead of the Institution and attached at the top of application form.

NOTE: (Please read the following instructions carefully before filling in the form.)

1. Go through the constitution of board, rule & regulations & all other information related to board, as there is no provision of State Information Centre fees refunding.
2. Use only prescribed Application Form.
3. Type/Write in Block/Capital letters only.
4. To be submitted along with self certified photocopies of the documents and enclosures.
5. Separate forms are to be used for Institutions having different premises/Locations/branches.

DETAILS OF THE INSTITUTION :

Name of the Institution :

Name of the Director of the Institution :

Year of the Establishment of the Institution :

Address :

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City : Distt.: State.:

Pin Code :

Phone No. with STD code :

Mobile No :

Fax No. :

E-mail address :

Website address if any :

Districts in the State:

THE SOCIETY/TRUST/COMPANY GOVERNING THE INSTITUTION

- a. Name :.....
- b. Registered Address :
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- c. Year of establishment :
- d. Registration Number :
- e. Registering Authority :
- f. List of Office Bearers:

President :

Vice-President :

Secretary :

Treasurer :
- g. Phone No. with STD code :
- h. Fax No. :
- i. Email Address :
- j. Objectives of the Society/Trust/Company :

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INFRA STRUCTURAL DETAILS OF THE INSTITUTION:

Description of Rooms Area in sq.ft.

Director Room :

Faculty Room :

Office :

Reception :

Parking Area :

Total Area in Sq. Ft. :

Facilities of Computer, peripherals and communication devises

(i) Number of Computers :

(ii) LCD Projector and LCD screens :

(iii) Number of Printers with Details of each :

(iv) Number of Scanners :

(v) Details of Internet Facilities :

(vi) Details of Networking :

(vii) Teleconferencing Facility :

(viii) :

(ix) :

Finances

1. Financial capability and strength of the Institution :

2. Source of Finances :

Declaration :

I _____ S/o _____ certify that the particulars furnished above or in the preceding pages are true to our best of my knowledge and express my willingness for an inspection to assess the infrastructural facilities, qualified staff etc. I declare that I will abide by all the rules and directions of BSTE, CG given from time to time. In case of any information furnished by us is found wrong or incomplete in any regard, I shall be the responsible for any decision taken by BSTE, CG.

I hereby undertake that i read all the policies, norms and Functions of the State Coordinator and I agree with the same. I also fulfill other responsibilities informed BSTE, CG from time to time. I understand and agree that fees paid by me with the application form or on account of processing fee, for conduct of inspection, for grant of approval of my application or any other fee or charges, as prescribed for State Information Centre once paid, will be non-refundable. Withdrawal of my proposal or rejection by the BSTE, CG at any stage for reason whatsoever shall not entitle me to claim any amount or compensation from the BSTE, CG

I have carefully read and understood all the guidelines, specifications and other information published by the BSTE, CG on the Website In case of any disputes or for any unforeseen issue(s) or issues not covered in the guidelines, specifications and other information published by the BSTE, CG, the decision of the BSTE, CG shall be final and binding on me and all other concerned. I agree that the BSTE, CG reserves the right to withdraw any location or any Discipline/Programme or its nomenclature at any time without assigning any reason and to make modifications in any information published anywhere whenever deemed necessary.

Signature

Head of the Institution/Authorized Person

Date:

(Designation)

Place:

(Seal)