

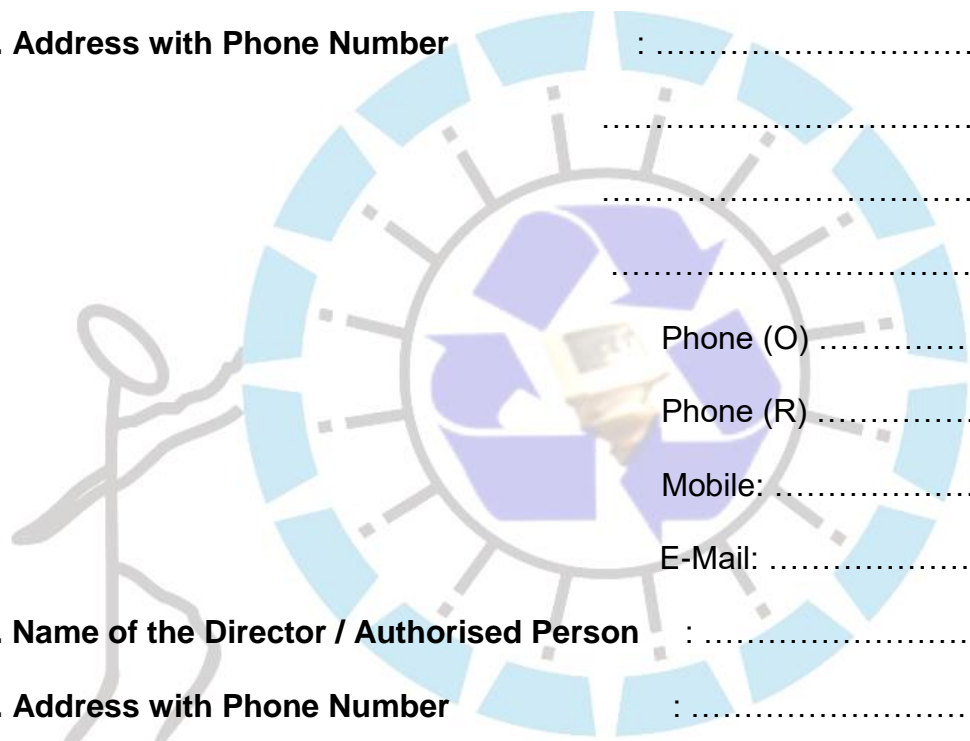


An ISO 9001: 2015 Certified Organisation

DATA SHEET

1. Name of the Institution/ Organization :

2. Address with Phone Number :



Phone (O)

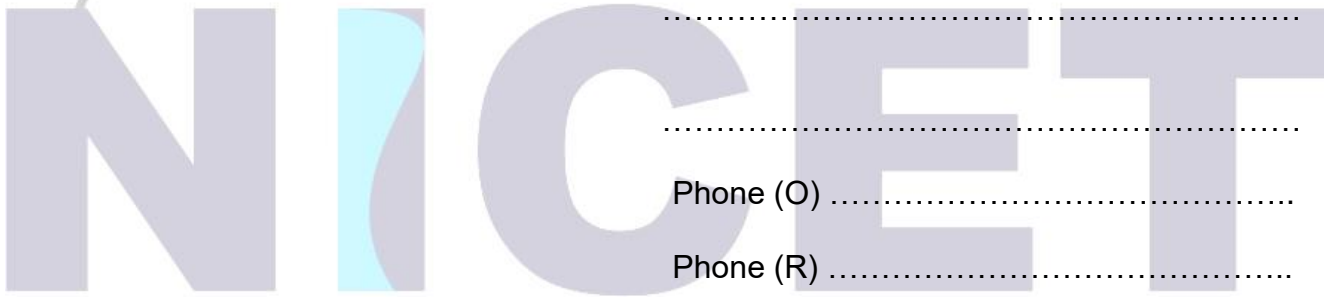
Phone (R)

Mobile:

E-Mail:

3. Name of the Director / Authorised Person :

4. Address with Phone Number :



Phone (O)

Phone (R)

Mobile:

E-Mail:

5. Educational Qualifications

No	Qualification	Year of Passing	Name of the Institute

B. AVAILABLE SOFTWARE:

.....
.....
.....
.....

C. AVAILABLE Multimedia and Animation SOFTWARE:

11. Center Details

- 1. Prospective city / town for Center :
- 2. Proposed Location :
- 3. Available area (in SqFt.) :
- 4. If available area is of self or on lease :
- 5. If the Proposed center would be on Proprietorship or on Partnership basis

or
Private limited firm.

If Partnership, Name of the Partners:

- 1.
- 2.
- 3.

(Attach a copy of Partnership deed)

12. Estimated Targets (Annually)

Year	No. of Students
First Year
Second Year
Third Year

TM

13. Your Market Survey

- 1. Population of the City/Town :
- 2. No. Of Schools & colleges in the area :
- 3. Existing Possible Competitors :
- 4. Per Capital income of the location (approx) :

14. How soon you can start

:

(Signature of Authority / Full Name)

Date:

15. Contact Person for Future Communication:

Name of the Contact Person :

Locality :

House Name :

Type of Locality Body :

Post Office :

District :

Telephone Number : Office

(Resi)

Mobile

Fax:

E- Mail:

Place:

Date :

TM

NICET
(Name and Signature of authorized Signatory)