

Application Form to establish Own Basic Training Center

I General

1. Name and full address of the establishment :
- Telephone No. :
- E-mail ID :
- Fax No. :
2. Nature of Product :
3. Name of Owner/Partner :
4. Name of Training Officer
HRD Manager :
5. Name of the trade/trades for
Basic Training :

II Staff for Basic Training

Sr. No.	Name of the Staff Member	Designation	Qualification	Nature of job handling	Remarks

III Infrastructure

1. Details of available equipments/tools required for each trade in following proforma .

Sr. No.	Name of equipments and tools as per prescribed norms	Quantity required	Quantity available	Remarks

2. Accommodation (layout of the training centre should be enclosed)

- i) Area of each group (Utilized of the Basic Training) -
- ii) Class rooms available with area -
- iii) Audio visual aids -
- iv) Whether building is own or rented -
- v) Library facilities -

Certified that to the best of my knowledge and belief the information furnished above is correct.

Date -

Place -

Signature of the employer