



# डॉ. शकुन्तला मिश्रा राष्ट्रीय पुनर्वास विश्वविद्यालय, लखनऊ

उत्तर प्रदेश सरकार

Dr. Shakuntala Misra National Rehabilitation University, Lucknow

Government of Uttar Pradesh

## APPLICATION FOR AFFILIATION OF INSTITUTIONS

### **1. Particulars of the Authorized Applicant**

1.1 Name of the Applicant \_\_\_\_\_

1.2 Designation : \_\_\_\_\_

1.3 Address : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1.4 E-mail Address : \_\_\_\_\_

1.5 Telephone No./ Mobile No. \_\_\_\_\_

### **2. Name of the Applicant/Society/Trust/Company:**

2.1 Postal Address : \_\_\_\_\_  
\_\_\_\_\_

2.2 E-mail Address \_\_\_\_\_

2.3 Telephone No./ Mobile No. \_\_\_\_\_

2.4 Website : \_\_\_\_\_

2.5 Permanent Account No. of Society/ Trust/Company : \_\_\_\_\_  
\_\_\_\_\_

2.6 Registration No. and validity of Society/Trust/Company: \_\_\_\_\_  
\_\_\_\_\_

**3. Details of Programs other than RCI, if any, run by the same applicant Society/Trust/Company :**

Name and Address of the Institution	Name of the Programme	Level of Programme	Duration of the programme	Year of starting the programme	Name of the Affiliating Board/University	Approving body

**4. Details of Programme Approved by RCI (if any)**

Name and Address of the Institution	Name of the Programme	Level of Programme	Duration of the programme	Year of starting the programme	Name of the Affiliating Board/University	Approving body

**5. Details of Programme seeking approval from RCI**

Name and Address of the Institution	Name of the Programme	Level of Programme (Diploma/Certificate/ UG/PG)	Duration of the programme	Proposed Year of starting the programme

**6. Details of Faculty/Programme to be affiliated from Dr. Shakuntala Misra National Rehabilitation University**

6.1 Name of the Institution : \_\_\_\_\_

6.2 Address of the Institution : \_\_\_\_\_  
\_\_\_\_\_

6.3 Name of Faculty : (1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

6.4 Level of Programme : \_\_\_\_\_  
(UG/PG/Diploma/Certificate)

6.5 Nature of Application : (1) New or old \_\_\_\_\_

6.6 Mode of Course : Face or distance : \_\_\_\_\_

6.7 Land Identification (Plot/Khasra No.) \_\_\_\_\_

6.8 Land Title : \_\_\_\_\_

6.9 Village: \_\_\_\_\_

6.10 Post : \_\_\_\_\_

6.11 Tehsil : \_\_\_\_\_

6.12 District \_\_\_\_\_

6.13 State: \_\_\_\_\_ Pin code \_\_\_\_\_

**7. Type of Institutions \_\_\_\_\_  
(Govt. /Govt. aided/Central Govt./Private)**

**8. Details of Infrastructural facilities available for proposed Institutions:**

8.1. Area of the Land in possession (in sq.mts.) \_\_\_\_\_

8.2 Built up area earmarked for the programme (in sq.mts) : \_\_\_\_\_

- 8.3 Whether the building constructed/proposed to be constructed on the same land. : YES/NO.
- 8.4 Date of Completion of construction of the building: \_\_\_\_\_
- 8.5 Name of the competent authority for approval of building plan and issue of completion certificate: \_\_\_\_\_
- 8.6 Address of the competent authority for approval: \_\_\_\_\_ of building plan and issue of completion certificate
- 8.7 Whether Building is disabled- friendly as per the law: \_\_\_\_\_
- 8.8 Total Built up Area (in sq. meter) : \_\_\_\_\_
- 8.9 Total Built up Area (in sq. ft.) \_\_\_\_\_

**9. Details of Land conversion :**

9.1 Order No. : \_\_\_\_\_ Dated \_\_\_\_\_

**10. Specification of the Lecture Hall/Rooms/Labs**

Description	Number	Length in meter	Breadth in meter	Carpet area in sq. meter
Lecture Hall				
Seminar Hall				
Library				
Laboratories				
Tutorial Room				
Administrative Office				
Store Room				
Girls Common Room				

Boys Common Room				
Workshop/Music Room				
Computer Centre				
Faculty Room				
Account Room				
Any other Room				

**11. Details of Instructional Resources**

11.1 Library : \_\_\_\_\_

11.2 Total Number of Titles : \_\_\_\_\_

11.3 Total Number of Books : \_\_\_\_\_

11.4 Journals : \_\_\_\_\_

11.5 Computer Laboratory: \_\_\_\_\_

11.6 No. of Computers : \_\_\_\_\_

11.7 Internet Access : \_\_\_\_\_

11.8 LAN : \_\_\_\_\_

**12. Details of Academic Staffs** *(Applicable for existing institutions)*

**Details of Academic Posts available at present** *(Please annexed details of faculty)*

<b>Name of the Post</b>	<b>Number of Post</b>	<b>Pay Scale</b>	<b>No. of Filled Posts</b>	<b>No. of Vacant Posts</b>

**13. Technical Supports Staff**

<b>Name of the Post</b>	<b>Number of Post</b>	<b>Pay Scale</b>	<b>No. of Filled Posts</b>	<b>No. of Vacant Posts</b>



**14. Administrative Staff**  
*(Details of Non-Academic Staff available at present)*

<b>Name of the Post</b>	<b>Number of Post</b>	<b>Pay Scale</b>	<b>No. of Filled Posts</b>	<b>No. of Vacant Posts</b>

**15. Details of Games & Sports**

<b>Number of Playgrounds</b>	<b>Length in meter</b>	<b>Breadth in meter</b>	<b>Carpet area in sq. meter</b>

**16. Details of Endowment Fund:**

- 16.1 Amount of Endowment Fund \_\_\_\_\_
- 16.2 Fixed Deposit Receipt Number : \_\_\_\_\_
- 16.3 Duration of the FDR \_\_\_\_\_
- 16.4 Date of issue (dd/mm/yyyy) : \_\_\_\_\_
- 16.5 Name of the Nationalized Bank: \_\_\_\_\_

**17. Details of Processing Fees:** (Rs. 1,00,000/- for two faculties including RCI approved faculty/course which is non-refundable)

- 17.1 DD/Pay order No.: \_\_\_\_\_  
17.2 Date of Issue: \_\_\_\_\_  
17.3 Name of Bank: \_\_\_\_\_  
17.4 Name of Branch: \_\_\_\_\_  
17.5 Total Amount: \_\_\_\_\_

**18. Details of Application form for Affiliation** (Rs. 25,000/ which is non-refundable)

- 18.1 DD/Pay order No.: \_\_\_\_\_  
18.2 Date of Issue: \_\_\_\_\_  
18.3 Name of Bank: \_\_\_\_\_  
18.4 Name of Branch: \_\_\_\_\_  
18.5 Total Amount: \_\_\_\_\_

**19. Details of Affiliation Fees** (To be submitted at the time inspection)

- 19.1 DD/Pay order No.: \_\_\_\_\_  
19.2 Date of Issue: \_\_\_\_\_  
19.3 Name of Bank: \_\_\_\_\_  
19.4 Name of Branch: \_\_\_\_\_  
19.5 Total Amount: \_\_\_\_\_

Date: \_\_\_\_\_

Place: \_\_\_\_\_

Signature of Authorized  
person with seal