BABA SAHEB AMBEDKAR
TECHNICAL EDUCATIONAL SOCIETY
National Partner of ST-IIT Bombay

Email : info@st-iitb.com, URL : www.st-iitb.com, Ph : 011-45150467

Application Form for Academic Partner under ST-IIT BOMBAY

Important Note: 1. kindly ensure that your institution fulfills all the requirements as stated in the norms for becoming Academic Partner as per the program(s) selected.
2. Kindly provide all the details / documents as stated in the application form and norms for becoming Academic Partner.
3. Kindly put your signature and seal of your institution on each page of the application form and documents enclosed.

NAME AND ADDRESS OF THE NATIONAL PARTNER OF ST-IIT BOMBAY BSATES, Vikaspuri, New Delhi	NAME AND ADDRESS OF THE PROPOSED ACADEMIC PARTNER

A. PROPOSED ACADEMIC PARTNER INSTITUTION PROFILE

1. Name of the Institution:	
2. Type of Institution **(Tick on appropriate option)** College includes aided and unaided both. Select the appropriate option. Kindly enclose all the necessary documents. Kindly enclose attested Deeds, Memorandum and Rules / Regulations (as applicable)	• Trust • Society • Co-operative Society • Limited Company • Private Limited Company • Under Graduate College • Post Graduate College • Autonomous College • Others
3. Name of The Trust / Society / Company / College running the Institution	
4. Date and Registration Number of the Trust (Please attach proof)	
5. Postal Address of the Institution	
6. Communications Details: (a) STD Code: (b) Contact Number: (c) Fax Number: (d) Mobile Number: (e) Email Address: (f) Website Address:	

7. PAN Number of the Institution (Kindly enclose the copy)	
8. Audited Balance Sheet of past Two Years If not Enclosed, reasons for non inclusion	**Enclosed / Not Enclosed**
9. Document relating to address proof of the Institution (Lease Deed / Rent Agreement / Sale Deed / Ownership Document)	**Enclosed / Not Enclosed**
10. Floor Plan / Layout Map of the Institution	**Enclosed / Not Enclosed**
11. Photograph of Institution, Classrooms, Computer Lab, Library, Reception etc.,	**Enclosed / Not Enclosed**

B. DETAILS OF MANAGEMENT / HEAD OF INSTITUTION

1. Name of the Head of Management:	
2. Designation:	
3. Postal address :	
4. Communications connectivity of (a) STD Code: (b) Phone Number: (c) Fax Number: (d) Mobile Number: (e) Residence Number: (f) Email Address:	
5. Personal details of Head of Management:	
6. Educational qualifications	
7. Profession and Experience	
8. Photo ID Proof (Kindly enclose the copy)	
9. PAN Number (Kindly enclose the copy)	
10. One Colored Photograph	**Enclosed / Not Enclosed**

C. INFRASTRUCTURAL FACILITIES

1. **Location of Proposed Institution Area** (Kindly tick whichever is applicable)	Metro State Capital District HQ Rural Town Hilly Region
2. **The Building of College/Institution is** (Kindly tick whichever is applicable and Furnish the documents)	Own/Rent/Lease/Other
3. **Total Carpet area of Institution (in Sq. ft):**	
4. **Total Site area of Institution (in Sq. ft):**	
5. **Type of Flooring of Institution:**	

1. Institution Facilities available:

S. No.	Type of Facility	No. of Rooms	Area (in Sq. ft)	Seating Capacity
1.	Class room			
2.	Computer Laboratory			
3.	Library			
4.	Reading room			
5.	Conference room			
6.	Auditorium			
7.	Staff Room			

2. Facilities in the Computer laboratory:

S. No.	Type of Facility	Count
1.	Server Computer	
2.	Client Computer	
3.	Printer	
4.	Scanner	
5.	UPS	
6.	CD / DVD Writer	

3. Type of Internet Facility

Leased Line ☐   Broad Band ☐   Dialup ☐   Others ☐

4. Details of Computers

Type	Processor	RAM	HDD	Network (Y/N)	Internet (Y/N)
Server Computer					
Client Computer					

(Attach list as per the above stated format for Details of Computers)

5. Details of Software available:

S. NO.	OS / COMPILER / PACKAGE / PROGRAMME / RDBMS/ LANGAUAGE / APPLICATION DEVELOPMENT SOFTWARE	VERSION

6. Library:

S. No.	Category	Count
1.	Reference Books	
2.	Text / Subject books	
3.	Periodicals Subscribed	
4.	Journals Subscribed	
5.	Newspapers Subscribed	
6.	Course CDs	
7.	Course Audio / Video cassettes	
8.	Books other than IT course books	

7. Equipments Available

S. No.	Equipment	Count
1.	Generator	
2.	LCD Projector	
3.	OHP	
4.	Fax	
5.	Photocopier	

D. CONNECTIVITY

1. Nearest Airport:	
2. Nearest Railway Station:	
3. Nearest Bus Stand / Stop:	
4. Distance from Airport:	
5. Distance from Railway station:	
6. Distance from Nearest national/State highway:	

E. ACADEMIC PARTNER CO-ORDINATOR DETAILS

1. Name of the Academic Partner Co-coordinator	
2. Designation :	
3.Communications connectivity of Academic Partner Co-ordinator: (a) STD Code: (b) Phone Number: (c) Fax Number: (d) Mobile Number: (e) Residence Number: (f) Email Address:	
4. Educational Qualifications:	
5. Profession and Experience : (Kindly enclose the detailed Bio data of the Academic Partner Co-ordinator)	

F. FACULTY DETAILS

S. No.	Name	Designation	Qualification	Teaching Experience (in Years)	Subject Taught By Him/Her

Kindly enclose the detailed Bio Data and Self Attested copies of educational certificates of the Faculties. The University may insist on meeting any/all faculty member and / or inspection of their appointment / contract / engagement orders.

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G. IS THE INSTITUTION RECOGNISED AS ACADEMIC PARTNER OF ANY OTHER UNIVERSITY OR EQUIVALENT?   - YES / NO

> **If Answer to G is YES, Kindly give the following details:**

S. NO.	NAME AND ADDRESS OF RECOGNIZING UNIVERSITY	RECOGNIZED AS	PROGRAMMES UNDERTAKEN

H. AICTE APPROVED LETTER (ATTESTED COPY) MUST BE ENCLOSED FOR ENGINEERING RELATED PROGRAMMES   YES/NO

I. DETAILS OF REMITTANCE OF ACADEMIC PARTNER APPROVAL FEE:

The amount payable per College/ Institution is Rs. 29,500/- per year.

A/C Beneficiary Name:	IIT Bombay Project and Consultancy
A/C Number:	2724101113370
Bank Name:	Canara Bank
Bank Branch:	IIT Powai
IFSC Code:	CNRB0002724

Note : Please share the e-copy/ receipt (manual NEFT) scan also after the payment transaction.

DECLARATION

1. I / We certify that all the information given above and in the preceding pages signed by me / us   is / are complete and correct.
2. I / We declare that the institute will abide by all the rules and directions of ST-IIT BOMBAY and National Partner(NP) given time to time.
3. I / We declare that I / We am / are authorized to sign on behalf of my organization and that my directors and shareholders / members (where relevant) are in total agreement of my / our application.
4. In case of any information furnished by me / us is found wrong or incomplete, I / We declare that the institute may be derecognized and is also open to any action as per law.
5. I / We undertake not to do any advertisement of our own in print / electronic media without the prior written permission of ST-IIT BOMBAY and National Partner(NP)
6. I / We hereby undertake that if it is ever found that the Institution is not able to run as per the norms, rules and procedures laid down by ST-IIT BOMBAY and National Partner(NP), ST-IIT BOMBAY and National Partner(NP) shall be free to withdraw the Academic Partner recognition.
7. I / We understand that ST-IIT BOMBAY and National Partner(NP) reserve the right to terminate the Academic Partner registration if it is found that I / We have knowingly made a false declaration in the form.

8. I / We understand that the approval of my / our institution as Academic Partner shall be done as per the norms of the ST-IIT BOMBAY and National Partner(NP)

9. I / We understand that ST-IIT BOMBAY and National Partner(NP) reserve the right to reject the application without assigning any reason.

10. I/We understand that the Academic Partner is approved for 3 years only, subject to subsequent renewal of yearly subscription of ST-IIT Bombay

Place:

Date: **Head of the Institution Signature, Name and Seal**

Checklist for Submission of Application Form

S.No.	Particulars	Yes	No
1.	Memorandum/Details of Society, Trust or Company		
2.	Resolution of Society, Trust or Company for becoming Academic Partner		
3.	Address proof of Institution (Lease Deed/Rent Agreement/Sale Deed/Ownership Documents)		
4.	Audited Balance Sheet of previous two years		
5.	PAN Number of the Institution		
6.	Floor Plan/Layout Map of the Institution		
7.	Photograph of the Institution, Classrooms, Lab, Library, Reception		
8.	Photo ID Proof of Head of Management		
9.	PAN Number of Head of Management		
10.	One Coloured Photograph of Head of Management		
11.	List of Computers with Configuration Details		
12.	Bio-data of Academic Partner Co-ordinator		
13.	Bio-data of Academic Faculties along with the copy of their self attested Educational certificates		
14.	NOC letter from Embassy (For Foreign Academic Partner)		

PAYMENT FLOW FOR NEFT

After getting the approval from your Principal/Management, the point person can do the Payment through **NEFT.**

Note: The amount payable per College/ Institution is Rs. 29,500 per year.
       The amount payable per School is Rs. 29,500 per year.

Below are the details required while making the payment.

Account Details for NEFT through Bank:

A/C Beneficiary Name:	IIT Bombay Project and Consultancy
A/C Number:	2724101113370
Bank Name:	Canara Bank
Bank Branch:	IIT Powai
IFSC Code:	CNRB0002724

Details to be shared by Colleges/Institution/Schools after making the payment (Mandate)
UTR (Unique Transaction reference)Number of Payer :
Date of Payment (DD/MM/YY) :
Mode of Payment:
Amount Paid :
Name of the payer :
College/Institution name/School name :
Full Address with Pincode :
Email id :
Phone number of the Payer :
GST Number :
PAN Number :
College/Institution name/School name registered for GST :

Note- If College/Institution/School do not have GST, kindly give a declaration stating that the College/Institute/School do not have GST number along with signature of FO or Principal.

Please share the e-copy/ receipt (manual NEFT) scan also after the payment transaction.

Note: If doing payment via NEFT from Netbanking account the payer has to add the above Account Beneficiary details once they login.

Do inform your State Training Manager once the payment is done. Also share the state training manager's Email ID and phone number with the point person who will be doing the payment to send the required details.