

For office use

Code No. \_\_\_\_\_ Year \_\_\_\_\_  
\_\_\_\_\_ Regional Committee

Date of Application \_\_\_\_\_

Course \_\_\_\_\_

Category: New Institution/New Course/Additional Intake

Type of Management \_\_\_\_\_

Affiliating Body \_\_\_\_\_

**Form of Application for Grant of Recognition to Institutions including Permission  
for Conducting a New Course/Additional Intake in Teacher Education Programme  
under Section 14/15 the NCTE Act, 1993**



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NCTE

National Council for Teacher Education  
Address of the Regional Committee concerned  
with address of the Website/e-mail/Telephone/Fax

Price Rs. 1000/-

Application for Grant of Recognition/Permission to Institutions for conducting a New Course/Enhancement of Intake under Section 14/15 of the NCTE Act, 1993

NOTE: DETAILS OF THE APPLICATION IF SUBMITTED ON-LINE

DATE OF SUBMISSION \_\_\_\_\_ APPLICATION ID \_\_\_\_\_

1. Particulars of the authorized applicant

- 1.1 Name of the Applicant Rakesh Choudhary  
1.2 Father's/Husband's Name Ram Singh Godara  
1.3 Occupation Advocate  
1.4 Official Position in the Governing Body of the Society/Trust Chairman

2. Particulars of applicant Society/Trust

- 2.1 Name of the Society/Trust Ch. Parmar Ram Godara Shiksha Samiti Bhadra
- 2.2 Whether a copy of Registration certificate attached.  Yes  No
- 2.3 Complete Postal Address of the Society/Trust.  
(Strike out/ Leave blank any of the following which is not applicable)
- Village/Town Chak 5 BHD - Teh - Bhadra  
Post office Bhadra  
Door/Plot Number 5 BHD  
Street Number Nabar - Hisar Bypass road  
Tehsil/Taluka Bhadra Town/City Bhadra  
District Hanumangarh State Rajasthan  
Pin Code 335501 STD Code 01504  
Telephone No. 223831 Mobile No. 9413380721  
Fax No. 224462 E-Mail ID Secretary@godaraeducation.com  
Website Address www.godaraeducation.org

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3. Details about the programme/course applied for

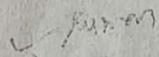
a.	Nature of proposal (Please tick only one choice)	- First Time Recognition - Enhancement of Intake - Additional Course
b.	Name of the Course applied for	- B. Ed.
c.	Level of the Course applied for	Secondary Teacher Education Programme
d.	Medium of Instruction	- Hindi
e.	Whether Course Curriculum fulfills the duration stipulated by NCTE norms and standards	Yes
f.	Mode	Distance/ Face to Face ✓
g.	Intake proposed	100
h.	Affiliating Body/University	Name Bikaner University
		Address Bikaner University Bikaner
		Telephone No.
i.	Normal month of commencement of the course	July

4. Particulars of the applicant institution

4.1 Name of the Institution (in capital letters) CH PARMA RAM GODARA TEACHER TRAINING COLLEGE

4.2 Complete Postal Address [As mentioned in the Affidavit]  
(Strike out/ Leave blank any of the following which is not applicable)

Village/Town Chak 5 BHD Teh. Bhadra  
 Post office Bhadra  
 Door/Plot Number 5 BHD  
 Street Number Nohar-Hisar Bypass road  
 Tehsil/Faluka Bhadra Town/City Bhadra  
 District Hanumanagar State Rajasthan  
 Pin Code 335501 STD Code 01504  
 Telephone No. 923831 Mobile No. 9413360721  
 Fax No. 224462 E-Mail ID Secretary@godaraeducation.org  
 Website Address www.godaraeducation.org

  
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4.3 Whether the institution is for (tick in the box)

Boys

Girls

Co-Ed

4.4 Whether the Institution is a Minority institution  
(Attach documentary proof issued by the Govt. concerned)

Yes

No

4.5 Type of Management (Please tick only one out of the following)

- (i) A Govt. institution
- (ii) A Govt.-aided institution
- (iii) A university department
- (iv) A deemed to be university Pvt/ Govt.
- (v) A self- financing private institution
- (vi) Any other, please specify.

(Please attach supporting documents. In case of institutions financed by Central Govt./State Govt./UT Admn. to the extent of not less than 50% of their recurring cost, a certificate to this effect from the Government concerned.)

4.6 Details of the existing Teacher Education Programmes/courses run by the same institution.

Sl. No.	Name of the programme	Academic session from which commenced	Existing approved intake	Regional Committee		Name of Affiliating Body	
				Recognition Order Number	Date	Name	Date of Affiliation
1	B.Ed.	2007-08	100	7787	8/11/07	Bikaner University	18/6/07
2	B.S.T.C. (D.Ed.)	2007-08	50	24916	18/8/07	Comm. Elementary Edu. Bikaner	30/8/07

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4.7 Details of courses other than Teacher Education Programme if any, run by the same institution.

Sl. No.	Name of the course/programme	Level of the course	Duration of the course	Year of starting of the course	Affiliating Body	
					Name	Date of Affiliation

5. Fees and Funds

5.1 Details of cost of application form of Rs. 1000/- (not applicable in case of application submitted online)

Name of the Nationalized Bank	SBBJ
Name of the Branch	Bhadra
Address	Bhadra
Draft Number	207746
Date	30/11/07
Receipt Number, if purchased	

5.2. Details of Processing Fee of Rs. 40,000/- only

Name of the Nationalized Bank	SBBJ
Name of the Branch	Bhadra
Address	Bhadra
Draft Number	207746
Date	30/11/07

(Please see Rule 9 of NCTE Rules, 1997 in terms of which Government Institutions are exempted from payment of processing fee)

5.1 + 5.2, = 41,000.00 DD. संलग्न है।

✓ Summary  
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Details of the Endowment fund (self-financed institutions/programmes)?  
 (Please see Clause 9 (1) of the NCTE (Recognition Norms and Procedure) Regulations,  
 2005 published on 13.1.2006)

Amount of Endowment Fund	5,00,000
Fixed Deposit Receipt Number	1,37,488
Duration of the FDR (Minimum five years)	Five years
Date of issue	30/11/2007
Name of the Nationalized Bank	SBI
Full address	Main Bazar Teh. Bhandra
Phone numbers.	01504-222032
Has the FDR been enclosed in original	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N

Particulars of the reserve fund (to be filled in the case of self-financed institutions/programmes)?

Amount of Reserve Fund	3,00,000
Fixed Deposit Receipt Number	7771A
Duration of the FDR (Minimum five years)	Five Year
Date of issue	15.05.2007
Name of the Nationalized Bank	COB
Full address	Gandhi Bari Teh. Bhandra
Phone numbers.	01504-387003
Copy of the Fixed Deposit Receipt has been enclosed	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N

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6. **Details of Infrastructural Facilities available for proposed programme/course**

6.1 Land

An affidavit on Rs. 100/- stamp paper duly attested by Notary on the prescribed format as required under Clause 8(6) of the NCTE Regulations, 2005

Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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6.2 Building

(Please refer to Clause 8 of NCTE (Recognition Norms and Procedure) Regulations, 2005

Description	To be filled in by Institution																
i) Date of approval of the Building plan by the competent authority/State Govt. <i>Gram panchayat Karimpur</i>	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>2</td><td>8</td><td>0</td><td>3</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	2	8	0	3	2	0	0	7
D	D	M	M	Y	Y	Y	Y										
2	8	0	3	2	0	0	7										
ii) Date of completion of construction of the building, if already completed	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>2</td><td>8</td><td>0</td><td>9</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y	2	8	0	9	2	0	0	7
D	D	M	M	Y	Y	Y	Y										
2	8	0	9	2	0	0	7										
iii) If construction of the building is not complete, the likely date of completion of construction	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y										
iv) Name and address of the competent authority	<i>Sarpanch, Gram Panchayat Karimpur Panchayat Samiti - Bhadrn.</i>																
v) Whether completion certificate obtained from the competent authority	<i>Y/N</i>																
vi) Whether Bldg. disabled - friendly as per relevant laws.	<i>Y/N</i>																
vii) Whether fire safety norms are being followed.	<i>Y/N</i>																
viii) Total Built up Area (in sq. meter) (in sq.ft.)	<table border="1"> <tr> <td>2</td><td>1</td><td>5</td><td>8</td><td></td><td></td> </tr> <tr> <td>2</td><td>3</td><td>5</td><td>0</td><td>0</td><td></td> </tr> </table>	2	1	5	8			2	3	5	0	0					
2	1	5	8														
2	3	5	0	0													

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6.3. Specification of Rooms and other infrastructural facilities

S.No.	Description	Room No.	Length In meter	Breadth In meter	Carpet area in sq. meter
1	2	3	4	5	6
1	Class Room	2	10.80	7.5	172.8
2	Class Room	4	7.5	6.0	180.0
3	Multipurpose Hall	1	12.0	7.5	90.0
4	Multipurpose Room	6	7.5	4	180.0
5	Seminar room/tutorial room	6	7.5	4	180.0
6	Principal Room	1	4	3	12.0
7	Administrative office	1	7.5	7	52.5
8	Store Room	3	4	3	36.0
9	Sports Store Room	1	4	4	16
10	Girls Common Room	1	7.5	4	30
11	Boys Common Room	1	7.5	4	30
12	Art & Crafts Room	1	4	4	16
13	Music Room	1	4	4	16
14	Socially Useful Productive Work (SUPW) Room				
15	Science Lab1	1	12	6	72
16	Science Lab2				
17	Psychology lab	1	12	6	72
18	Educational Technology (ET) /ICT Lab	1	13	8	103
19	Workshop				
20	Any other Room/Hall	1	8	7.5	60
21	Toilets				
	(i) Male	2	4	3	24
	(ii) Female	2	4	3	24



7. **Instructional Facilities**

7.1 Library

Total Area (In Sq. ft.)

1000

7.2 Manpower

7.2.1 Academic and Non-Academic Staff (Applicable for existing institutions)

7.2.1.1 Details of Academic Posts available at present

Name of the Post	Number of Post	Pay Scale	Filled	Vacant
Principal (B.Ed)	1	20,000	Filled	
Principal (S.Te)	1	14,000	Filled	
Lecturer	12	8000-13500	Filled	

7.2.1.2 Details of Non-Academic Staff available at present

Name of the Post	Number of Post	Pay Scale	Filled	Vacant
D.S.	1	8500	Filled	
L.D.C	2	3250-3500	Filled	

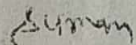
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8. Arrangement for Games and Sports

8.1 Details of availability of playgrounds

Sl. No.	Number of Playgrounds	Length in meter	Breadth in meter	Area in sq mt.
1	1	52 mt.	50 mt	2600 Sqmt.
2	1	50 mt	40 mt	2000 Sqmt.

Signature of the authorized designated authority giving undertaking  
alongwith his/her official and position office Seal)

  
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