JAWAHAR LAL NEHRU COMPUTER SAKSHARTA MISSION®

HEAD OFFICE: Vikas Marg, Laxmi Nagar, Delhi-110092

Tel.: 011-65369800 Mob.: 09899470745, 09899479741 Fax.: 011-65369800

Website: www.jncsm.org, E-mail: director@jncsm.org

SURVEY FORM

★ Gompuner Gouernon ★

Ref	f. No				Date					
Nar	ne of th	e Co-Ordinator	:		District :					
Sta	ite :			Block :						
1.	. Name of the Centre :									
2.	Present Address of the Centre :									
3.	Tot	al Area of Cent	re (Sq. Fit)							
	Room		N	lumber	Area (Sq. Fi	t) Sittin	Sitting Capacity			
	Theo	У								
	Practi	cal								
	Office	Room								
4.	De	tail of Laborato	ry -							
	Sr. No.	Computer	with Type	Year of Purchase	Cost	Software Facilities	Other Attaching			
5.	Detail of Laboratory - (i) Inverter Generator									
6.	Teacher's Detail :									
	Sr. No.	Name	Mobile No.	Qualification	Total Experience	Date of Appointment	Status Full Time/ Part Time			

Personal detail of the Applicant

'.	Name of the applicant :	Photograph of					
3.	Father/Husband's Name:	the head of the Institute/Chief					
€.	Date of Birth :	Executive/ Principal/					
LO.	Residence Address :						
	Phone						
	Fax						
	Mobile						
	E-mail						
l1.	Academic Qualification						
	Certificate / Degree	Institution / University	Year of Passing				
12.	Professional Qualification :		· · · · · · · · · · · · · · · · · · ·				
3.	Service Background/Business	Background:					
L4.	Annual Income/Turn Over :						
L5.	Bank Account No. :						
L6.	Name of Bank Branch & City						
L7.	7. Why have you decided to go for education business?						

Details of two know Person :						
Name	Occ	upation	Address & Phone	Relation		
Source of funds	Personal	Family	Loan from	Private		
	Saving	Financial	Institution	Loans		
Would franchise by your main business or additional business?						
	Main		Additional			
When would you	u liko to start fra	nchico contro?				
When would you like to start franchise centre?						
	Month		Year			
	5.63 / 5	<i>(</i> 0				
	Proposed name of firm/Company/Society (enclose Particulars of Partners/directors/members)					

All the above details are true of the best of my knowledge						
Date :						
Place :						
Signature of Co-Ordinator	SIGNATURE OF APPLICANT					
(For Office Use On	aly)					
(Head Office Report)						
	Signature of Franchise Head					

Note: Fill up the survey form clearly and send the regional office of corporate office address are given

REGIONAL OFFICE

JAWAHAR LAL NEHRU COMPUTER SAKSHARTA MISSION

214, IInd Floor Super Market Budh Bazar, Moradabad- 244001

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