



NATION AL SKILL INDIA MISSION

APPLICATION FOR AFFILIATION

Name of the Institution	
Postal Address	
Name of Institution Head with Designation	
Contact No.	
Email address	
Name of Contact Person	
Mobile No.	
MODILE NO.	
Email address	
Courses/ Job roles for which affiliation is sought	
No. of Classrooms available , an d area of each class room	
Practical Halls available with ar ea specification	
Area of office room	
Whether tools, equipments and furniture available as per norms? (Attach separate list)	
Whether Drinking water facility available	
Whether separate toilet facility available for girls and boys	

Whether qualified trainers available? (Attach CV of Trainers)	
Whether Biometric system for attendance available.	

Name & Signature of the Head of the Institution

(Office seal)

For office use only