

KSEDI AFFILIATION FORM

PLEASE FILL UP IN CAPITAL LETTERS

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| 1. Name of the Applicant: | |
| 2. Name of the Institution/Trust/Society: | |
| 3. Institution/Trust/Society Address: | |
| 4. Telephone Number: | |
| 5. Fax Number: | |
| 6. Mobile Number: | |
| 7. E-Mail Address (MANDATORY): | |
| 8. Institute Authorized Person Address with Cell: | |
| 9. Do you have own Building or Rental: | |
| 10. Do you have any experience in the field of education & training: | |
| 11. In which Department, you want to run the course (Select Department - Course): | |
| 12. Details regarding Teaching Faculty: | |
| 13. Details regarding Class Rooms and Facilities: | |
| 14. Any other Relevant Information: | |
| <input type="checkbox"/> If necessary, use additional sheets for entering details. | |

I hereby accept all the terms and conditions of KSEDI

Principal Signature

Note: The following documents to be enclosed with application :-

- 1) Promotional Fee Rs.50,000/- (Rs. 47,000 Approval Fee + 3,000 ID Card Fee) or 5000 USD Demand Draft in favour of KSEDI payable at Chennai, India.
- 2) Rs. 50/- agreement plain bond (2 nos) with Principal Name for MOU
- 3) If Rental building, rental agreement.
- 4) Photograph of infrastructure like Building, Class Room and Other Facilities
- 5) Principal Photo 2 Nos. (Passport size)