

MSCTE APPLICATION FORM
FOR
NEW/EXTENSION AFFILIATION OF COMPUTER INSTITUTES FOR DCA

[Case A] Diploma in Computer Application (DCA Semester I)

[Case B] Diploma in Computer Application (DCA Semester II)

Application for the Case of A/B//Both : Case _____

Date of Submission of Application: _____

Type of Affiliation (New/Extension): _____

1.0 Information about Institution

1.1 Name of the Institution: _____

1.2 Full Address with pin code: _____

1.3 Telephone No.: _____

1.4 Mobile No.: _____

1.5 Fax No.: _____

1.6 Website: _____

1.7 Email: _____

2.0 Information about Principal/Director

2.1 Name of the Principal/Director: _____

2.2 Mobile No. of Principal/Director: _____

2.3 Email: _____

3.0 Information about sponsoring Trust/Society/Controlling Agency

3.1 Name of the Trust/Society/Controlling agency: _____

3.2 Nature of Trust/Society/Controlling Agency: _____

(Govt./Charitable/Autonomous/Voluntary/Private)

3.3 Date of Establishment (Attach proof): _____

3.4 Full Address with pin code: _____

3.5 Telephone No.: _____

3.6 Mobile No.: _____

3.7 Fax No.: _____

3.8 Website: _____

3.9 Email: _____

3.10 Name of the Chairman of the Trust/Society/Controlling Agency: _____

3.11 Mobile No. of Chairman: _____

3.12 AMC Registration Certificate (Attach proof if applicable): _____

4.0 Land Details

4.1 Land Owner: _____

4.2 Total area of land: _____

4.3 LSC Registration details: _____

4.4 Is the land exclusive to the institution or is it being shared: _____

5.0 Building Details

5.1 Is the building Owned/Leased/Rented: _____

5.2 Is the Building exclusive to the institution or is it being shared: _____

5.3 Total area in square feet occupied by the Institution: _____

5.4 Quality of Building (Concrete/Semi-concrete): _____

5.5 Electrical Connection Certificate (Attach proof): _____

6.0 *Details of Computers*

6.1 Provide the details as specified in Appendix- A

7.0 *Details of LAN, Printer and other Peripherals*

7.1 Provide details as specified in Appendix –A

8.0 *Details of Internet Connection*

8.1 Name of Service Provider: _____

8.2 Type of Account (Broadband/ISDN/Dial-up/Leased Line): _____
(Attach proof)

9.0 Details of Teaching Aids

Name of Equipment *Quantity*

9.1 Television set

9.2 LCD Projector

9.3 Whiteboard (not less than 3ft. x4ft.)

10.0 Details of Office space

10.1 Provide details of office space as specified in Appendix-B

11.0 Details of Furniture and other infrastructure

11.1 Provide details of furniture and other infrastructure as specified in Appendix-C.

12.0 Details of Faculty

12.1 Provide details of Faculty as specified in Appendix-D.

13.0 Details of Software

13.1 Provide details of Software as specified in Appendix-E.

14.0 Details of Library

14.1 Provide details of Library as specified in Appendix-F.

15.0 Photograph of the Institute (Post Card Size)

15.1 Provide photograph of the Institute as specified in Appendix-G.

Appendix – A

Computers: Provide details of Computers to be used in the Institution

Table-A

Sr. No.	Machine Type : Desktop/Laptop	Processor type	RAM capacity	Hard Disk Capacity	Monitor Type (CRT/LCD/LED)	CD/DVD Drive	OS Type	Number of Computers
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

LAN: Provide details of LAN setup in the Institution

Table-B

Type Client Server/Peer-to-Peer	Network OS	Number of Computers on the LAN	Make of Switch/Hub	Number of Ports on the Switch/Hub	Speed of Switch/Hub

Printers: Provide details of Printers used at the Institution

Table-C

Sr.No.	Printer Type (Inkjet/Laser/Dot Matrix)	Make	Model	Quantity
1				
2				
3				
4				
5				

Other Devices: Provide details of Other Devices.

Table-D

Sr.No.	Device Type	Details (Make ,Model etc)	Quantity
1	UPS/Generator		
2	Scanner		
3	Digital Camera/Video Camcorder		
4	Copier/Xerox machine		
5	Projector		
6	Air conditioner		
7			
8			
9			
10			

Appendix – B

Office Space: Provide details of Office/Lecture halls in the institution.

Table-A

Details of Computer Lab	Dimension of Lab (in ft)	Area in Sq. ft.	Student Capacity
Classroom 1			
Lab1			
Lab2			
Lab3			

Total Area = _____

Table-B

Other	Dimensions (in ft)	Area in Sq. ft.
Reception room		
Office room		
Faculty room		
Toilet		
Library		

Total Area = _____

Grand Total of Table A + Table B = _____

Appendix – C

Furniture/Fixtures: Provide details of Furniture/fixtures used in the Institution

Table-A

Sr. No.	Furniture Items	Number
1	Tables	
2	Chairs	
3	Cup-boards	
4	Tube-lights	
5	Fans	
6	Fire extinguisher	
7	Water filter	
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Appendix – D

Faculty: Provide details of Faculty in the Institution. (Attach relevant educational certificates. Separate list for each course)

Table-A

Sr. No.	Name of Faculty	Regular or Visiting	Educational Qualifications	Total Experience in teaching/management	Contact Number	Address for Correspondence
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Appendix – E

Faculty: Provide details of Software used in the Institution

Table-A

Sr. No.	Name of Software	Version/Specification
1	Windows	
2	MS Office	
3	Page Maker	
4	Adobe Photoshop	
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		

Appendix – F

Books: Provide the list of Books in the Library (List may be extended as per requirement)

Table-A

Sr. No.	Name of the Books	No. of Copies
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Magazines: Provide details of Magazines and journals subscribed by the Library

Table-B

Sr. No.	Name of the Magazines	Period of subscription (monthly/annual)	No. of Copies
1			
2			
3			
4			
5			
6			
7			
8			

CBTs: Provide details of Training materials (DVDs, CDs etc) at the Library

Table-C

Sr. No.	Name of the CBT	Subject area covered
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Appendix – G

Sr. No.	Photograph of the Institute (post card size)
1	Front View (Entrance displaying institute's name board)
2	Computer Laboratory
3	Classroom
4	Library/Resource Centre
5	Office Room (with sign board)
6.	Other photos if any which will convey the facilities available at the institute

INSTRUCTIONS

1. Each application form cost Rs.100/- (Rupees Hundred).
2. The form should be filled up in clear legible handwriting and use capital letters wherever possible.
3. Complete address of the institute and contact number must be provided.
4. All required documents should be attached and duly attested.
5. Each page of the form must be signed by Principal/Director with date.
6. All appendices/tables should be duly filled up wherever applicable.
7. Attach photocopy of EPIC, Tribal certificate, Residential certificate and Government registration certificate (LE&IT/Industry/AMC) of the owner of the institute.
8. Photographs as demanded by the form must be attached.
9. Application form must be submitted on or before last date of submission.
10. **Applicable inspection fees to be deposited before inspection.**
11. For any query contact Office of Technical Wing Chaltlang, Aizawl:
Ph: 0389-2340603
Email: dhtemizoram@gmail.com