

MSCTE APPLICATION FORM
FOR
NEW/EXTENSION AFFILIATION OF COMPUTER INSTITUTES FOR
DIPLOMA IN COMPUTER APPLICATION COURSE (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 Email: _____

1.6 Date of Establishment : _____

1.7 AMC Certificate (**Attach proof**): _____

2.0 Information about Principal/Director(Owner)

2.1 Name of the Principal/Director: _____

2.2 Mobile No. : _____

2.3 Email: _____

**(Attach photocopies of relevant educational certificates, EPIC, Residential
& Tribal certificates of Principal/Director)**

3.0 Information about sponsoring Trust/Society/Controlling Agency(**if applicable**)

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 Society registration certificate**): _____

3.4 Full Address with pin code: _____

3.5 Mobile No.: _____

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

3.7 Mobile No. of Chairman: _____

5.0 Building Details

5.1 Is the building Owned/Rented(**Attach Rent agreement**): _____

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 electric bill proof**): _____

6.0 *Details of Computers*

6.1 Provide the details as specified in Appendix- A Table A

7.0 *Details of LAN, Printer and other Peripherals*

7.1 Provide details as specified in Appendix –A Table B & Table C

8.0 *Details of Internet Connection*

8.1 Name of Service Provider: _____

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

(Attach Broadband bill proof)

9.0 Details of Office space

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

10.0 Details of Furniture and other infrastructure

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

11.0 Details of Faculty

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

12.0 Details of Software

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

13.0 Details of Library

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

14.0 Photograph of the Institute (Post Card Size)

14.1 Provide printed copies 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 & Hard disk capacity	Monitor Type (CRT/LCD/ LED)	CD/DVD Drive	OS Type	Number of Computers	Remarks
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 electronic devices.

Table-D

Sr.No.	Device Type	Details (Make ,Model etc)	Quantity
1	Power Back up system (UPS/Generator/Battery etc)		
2	Scanner		
3	Digital Camera		
4	Copier/Xerox machine		
5	Projector		
6	Air conditioner		
7	Television		
8	Smart Board		
9	CCTV System		
10	Biometric System		
11	Smart Card System		
12			
13			

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			
Classroom 2			
Lab 1			
Lab 2			

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	Whiteboard/black board (with size)	
9	Notice Board	
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		

Appendix – D

Faculty: Provide details of Faculty in the Institution.

**(Attach self attested relevant educational certificates with one copy of self attested photograph)
No Permanent Faculty should be found to be engaged in more than one institution even if it is a branch of the same institute)**

Table-A

Sr. No.	Name of Faculty	Regular or Visiting	Educational Qualifications	Number of years employed	Contact Number	Address for Correspondence
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

Appendix – E

Software: 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			

Appendix – G

Sr. No.	Printed photographs of the Institute
1	Front View (Entrance displaying institute's name board)
2	Computer Laboratory
3	Classroom
4	Library/Book rack
5	Office Room
6.	Other photos if any which will convey the facilities available at the institute

IMPORTANT INSTRUCTIONS

1. Each application form cost Rs.100/- (Rupees Hundred) which must be submitted at the time of submitting the application form.
2. The form should be filled up in all respects wherever applicable.
3. The form should be filled up in clear legible handwriting and use capital letters wherever possible.
4. Complete address of the institute and contact number must be provided.
5. All required documents should be attached and duly attested.
6. Each page of the form must be signed by Principal/Director with date.
7. All appendices/tables should be duly filled up wherever applicable.
8. Printed copies of photographs must be attached.
9. Applicable inspection fees of Rs. 2000/- for Aizawl town and Rs. 3000/- for others to be deposited at the time of submission of the application fee without which inspection will not be carried out for further action.
10. **Application form submitted without all the above requirements shall not be accepted nor processed for further action.**
11. **Application form must be submitted on or before last date of submission. Form submitted after the last date will not be considered for further action.**
12. For any query contact Office of Technical Wing Chaltlang, Aizawl:
Ph: 0389-2340603
Email: dhtemizoram@gmail.com