

## International Safety Management Council

# <u>APPLICATION FORM</u> FOR AFFILIATION /REGISTRATION OF INSTITUTE

| FOR AFFIL | IATION /I | REGISTRA | ATION OF | INSTITUTE |
|-----------|-----------|----------|----------|-----------|
|           |           |          |          |           |
| •         |           |          |          |           |

| 1   | Name of Institute   |  |  |
|-----|---|--|--|
| 2   | Location and Address  |  |  |
| 2   |   |  |  |
|     | a. Phone No b. E-mail   |  |  |
|     | c. Web site   |  |  |
| 3   | Name of Head of Institute   |  |  |
|     | a. Phone No b. Cell No  |  |  |
| 4   | Date of inception   |  |  |
| 5   | Date of commencement of classes   |  |  |
| 6   | Is the Institute registered by any regulatory authority/body?   |  |  |
| 7   | Does the Institute possess its own building or hired building?  |  |  |
| 8   | Please attach a copy of building plan (Attested)  |  |  |
| MAI | NAGEMENT  |  |  |
| 1   | Is the Managing Body Registered?  |  |  |
| 2   | Name and address of the Manager/Secretary of the Managing Body.   |  |  |
| 3   | Is the Head of the Institute a member of the managing Body?   |  |  |
| 4   | Please Attach:  |  |  |
|     | <ul> <li>* A list of members of Managing Body.</li> <li>* A copy of constitution/ rules of business (if any)</li> </ul> |  |  |
| TRA | ADE & COURSES   |  |  |
| 1   | Name of Trades/Courses & duration for which registration is applied (Attachment-I)                                      |  |  |
| 2   | Nos of trainees to be trained in each course/trade  |  |  |

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#### **CLASSROOMS / WORKSHOPS**

| 1           | Nos. and size of Workshops/Laboratories- trade wise   | (Attachment-II)   |
|-------------|---|-------------------|
| 2           | Nos and size of classrooms-trade wise   | (Attachment-III)  |
| 3           | Nos. and type/specifications of computers.  | (Attachment-IV)   |
| 4           | No. of student in each Room/workshop-trade wise.<br>Please provide layout diagram                                     | (Attachment-V)    |
| <u>EQU</u>  | IPMENT & TOOLS  |                   |
| 1           | Please provide detailed list with size, capacity, specifications and Nos. of equipment/tools available in each trade. | (Attachment-VI)   |
| <b>STA</b>  | <u>FF</u>   |                   |
| 1           | List of staff with their qualifications and experience.   | (Attachment-VII)  |
| 2           | Are the Teachers/Instructors employed through written agreement?  | (Attachment-VIII) |
| 3           | Statement showing salary, scales of pay and allowances for teachers /instructors.                                     | (Attachment-IX)   |
| 4           | Service Rules and Regulations, if any.  | (Attachment-X)    |
| 5           | Is there any capacity building programme for Teachers/Instructors?  |                   |
| <u>FINA</u> | ANCES   |                   |
| 1           | Does the Institute posses sufficient amount in Endowment Fund?<br>Please state the balance available in the Fund      | (Attachment-XI)   |
| 2           | Are the receipts in the name of the Institute?  | (Attachment-XII)  |
| 3           | What are the sources of annual income and assets of the Institute?  |                   |
| 4           | What will be the expected annual income from fee?   |                   |
| 5           | What is the annual total expenditure of the Institute?  |                   |
| 6           | What is the admission/registration fee charged per trainee (Trade wise)?  |                   |
| 7           | What is the monthly fee charged per trainee (Trade wise)?   |                   |
| RES         | EARCH & DEVELOPMENT   |                   |
| 1           | Does the Institute have any R&D Programme?  |                   |
| 2           | If yes, what are the dissemination and utilization of R&D outputs?  |                   |



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| 1    |  |                                |
|------|--|--------------------------------|
| PHYS | SICAL FACILITIES   | Comments (if any)              |
| 1    | Library  |                                |
| 2    | Washrooms/bathrooms                                      |                                |
| 3    | Fire fighting equipment                                  |                                |
| 4    | Medical Aid  |                                |
| 5    | Any other  |                                |
| STUD | DENTS SUPPORT  | Comments (if any)              |
| 1    | Uniform  |                                |
| 2    | Guidance Counselor                                       |                                |
| 3    | Any other  |                                |
| TEAC | CHING & LEARNING  Please provide the following documents | ments <u>Comments (if any)</u> |
| 1    | Prospectus   |                                |
| 2    | Students registration form                               |                                |
| 3    | Syllabus   |                                |
| 4    | Instruction manuals                                      |                                |
| 5    | Teaching methods and techniques                          |                                |
|      |  |                                |

Seal of Institution

Name & Signature
Head of the Institute