	For office use	
Code No	Year	
Date of Application Course_	Region	al Committee
	ution/New Course/Addition	onal Intake

Form of Application for Grant of Recognition to Institutions including Permission for Conducting a New Course/Additional Intake in Teacher Education Programme under Section 14/15 the NCTE Act, 1993



National Council for Teacher Education Address of the Regional Committee concerned with address of the Website/e-mail/Telephone/Fax



Price Rs. 1000/-



Application for Grant of Recognition/Permission to Institutions for conducting a New Course under Section 14/15 of the NCTE Act, 1993

		101E ACI, 1993
NO	OTE: Please refer to the instruction	ns at page-14 before submitting the application.
	DATE OF SUBMISSION	APPLICATION ID
1. Par	ticulars of the authorized applicant	
1.1	Name of the Applicant	Dr. Madhusudan D. Makwana
1.2	Pather's/Husband's Name	Shri Dhirubhai Makwana
1.3	Occupation	Employed
1.4	Official Position in the Governing Body of the Society/Trust	Registrar
2. Par	ticulars of applicant Society/Trust/Body	(Universtiy)
2.1	Name of the applicant Body	Indian Institute of Teacher Education
2.2	Whether a copy of Certificate of Reg and MOA/ Bye-laws attached.	istration ¥e's ✓No

Complete Postal Address of the applicant Body. 2.3 (Strike out/ Leave blank any of the following which is not applicable)

(Applicable in case the institution is managed by Society/Trust)

Door/Plot Number Ramkrishna Paramhans Vidya Sankul

Street Number

Sector-15, Nr. Mahatma Mandir

Village/Town

Gandhinagar

Post office

Gandhinagar

Tehsil/Taluka

Gandhinagar

Town/City Gandhinagar

District

Gandhinagar

Pin Code

<u>382016</u>

State

<u>Gujarat</u>

STD Code 079

Telephone No.

<u>23287339</u>

Mobile No. <u>9978407756</u>

Fax No.

<u>23288016</u>

E-Mail ID: iiteregistrar@gmail.com

Website Address

www.iite.ac.in





- 2.4 Permanent Account Number of Society/Trust/Body: AAALI0214L
- Details about the programme/course applied for

(:)	IN.		
(i)	Nature of proposal	- First Time	Recognition
	(Please tick only one choice)		
(ii)	Name of the Course applied for	M.Sc./M.A. M.E	
		3 vrs PG Integra	ted Innovative Teacher Education
(iii)	Level of the Course applied for	(Teacher Educat	
(iv)	Medium of Instruction	English	
(v)	Whether Course Curriculum fulfills the duration stipulated by NCTE norms and standards	Yes	
(vi)	Mode	Face to Face	
(vii)	Intake proposed	50	
(viii)	Affiliating Body/University	Name	Indian Institute of Teacher Education
		Address	Nr. Mahatma Mandir, KH-Road, Sector-15, Gandhinagar
		Telephone No.	079-23287339
(ix)	Normal month of commencement of the course		June

4.	Particulars	of the	applicant	institution
	1 ditiodialo	01 1110	applicant	montation

4.1	Name of the Institution (in capital letters)	CENTRE OF EDUCATION

4.2 Complete Postal Address [As mentioned in the Affidavit]
(Strike out/ Leave blank any of the following which is not applicable)

Land Identification (Plot/Khasra No.) Government Higher Secondary School Campus, Sector-15

Address of the Land: Ramkrishna Paramhans Vidya Sankul
Nr. Mahatma Mandir,Kh-Road, Sector15, Gandhinagar

Plot Number

Street Number Nr. Mahatma Mandir, KH-Road, Sector-15

Village/Town Gandhinagar
Post office Gandhinagar
Tehsil/Taluka Gandhinagar

Tehsil/Taluka Gandhinagar Town/City Gandhinagar District Gandhinagar Pin Code 382016

State Gujarat STD Code 079

Telephone No. 23287339 Mobile No. 9978407756





	Fax No. Website Address Whether the instit	23288016 www.iite.ac.in ution is for (tick in the	E-Mail ID	iiteregistrar	@gmail.coi
	Boys	Girls		Co-Ed	$\boxed{\hspace{1.5cm}}\sqrt{\hspace{1.5cm}}$
4.4	Whether the Institution (Attach documentary)	ution is a Minority ins y proof issued by the G	titution ovt. concerned)	Yes	√No

- 4.5 Type of Management (Please tick only one out of the following)
 - (i) A Govt. institution
 - (ii) A Govt.-aided institution
 - (iii) A university department ✓ (University Constituted Institution)
 - (iv) A deemed to be university Pvt/ Govt.
 - (v) A self- financing private institution
 - (vi) Any other, please specify.

 (Please attach supporting documents. In case of institutions financed by Central Govt./State Govt./UT Admn. to the extent of not less than 50% of their recurring cost, a certificate to this effect from the Government concerned.)
- 4.6 Details of the existing Teacher Education Programmes/courses run by the same applicant Society/Trust/ Body.

SI No		Name of the programme	Academic session from which	Existing approved intake	Region Committ			of Affiliating Body
			commenced		Recognition Order Number	Date	Nam e	Date of Affiliation
1	Centre of Education	B.Sc. B.Ed.		100	132422	3/3/15	IITE	University Department
2	Centre of Education	B.A. B.Ed.		100	132406	3/3/15	IITE	University Department

4.7 Details of courses other than Teacher Education Programme if any, run by the same applicant Society/ Trust/ Body.

	SI. No.	Name of the institution	Name of the course/programme	Level of the course		Year of starting of the course	•	ting Body Date of
ŀ		Centre of						Affiliation
L	1	Research	Ph.D.		4 Year	2014-15	IITE	University
								Department





4.8 Details of the application(s) for teacher education programme(s)/course(s) already submitted by the same applicant society/trust/body which is/are pending for final decision

	SI. No	Name of	Date of	Code	Name of the	Academic	Dranagad	D	0	7
		the institution	application	No.	programme	session	Proposed intake	Regional Committee	Status	
-						for which applied		to whom applied		
					N.A					

- Fees and Funds
 - 5.1 Details of cost of application form of Rs. 1000/(not applicable in case of application submitted online)

Draft Number	406059
Date Name of the Nationalized Bank	23/04/2015
Name of the Branch	Bank of India Sector-16, Gandhinagar
Address Receipt Number, if purchased	Sector-16, Gandhinagar

5.2. Details of Processing Fee of Rs. 50 000/- only

U/- only
N.A.
N.A.
N.A.
N.A.
N.A.
YN

(Please see Rule 9 of NCTE Rules, 1997 in terms of which Government Institutions are exempt from payment of processing fee)

- Details of the Endowment fund (self-financed institutions/programmes)? (Please see Clause 10 (1) of the NCTE Regulation, 2014)
 - (i) Particulars of the Endowment fund (to be filled in the case of self-financed institutions/ programmes)?





Amount of Endowment Fund	N.A.
Fixed Deposit Receipt Number	N.A.
Duration of the FDR (Minimum five	N.A.
years)	
Date of issue	N.A.
Name of the Nationalized Bank	N.A.
Full address	N.A.
Phone numbers.	
Has the FDR been enclosed in original	YN

Particulars of the reserve fund (to be filled in the case of self-financed institutions/ programmes)? (Please see Clause 10 (1) of the NCTE Regulation, 2014)

Amount of Reserve Fund	NI A	
	N.A.	
Fixed Deposit Receipt Number	N.A.	
Duration of the FDR (Minimum five	N.A.	
years)		
Date of issue	N.A.	
Name of the Net	1 1 1 3 .	
Name of the Nationalized Bank	N.A.	
Full address	N.A.	`
Phone numbers.		
Has the FDR been enclosed in original	Υ	N

194.	Details of Infrastructural	Facilities available for	proposed programme/course
------	----------------------------	--------------------------	---------------------------

(i)	Area of the land in possession (in sq. mts.)
-----	--

4 5 600

194. Built up area earmarked for the course (in sq. mts.)

5 0 12

(iii) Whether an affidavit on Rs. 100/- stamp paper duly attested by Notary / Oath Commissioner on the prescribed format as required under Clause 8(8) of the NCTE Regulations, 2007 has been submitted.

Yes**√** No

(iv) Whether certified copies of land ownership/lease documents are enclosed as per Regulation 8(8) of the Regulations, 2007

Yes√ No





.(v)	Whether English Version of Land Ownership/Lease Documents, duly Notarized are enclosed	Yes√	No
(vi)	Whether copy of approved building plan is enclosed.	Yes√	No
(vii)	Whether copy of building completion certificate is enclosed, in case building is constructed	Yes	No✓
(viii)	Whether the building constructed is proposed to be constructed in the same land as indicated in col. 4.2	Yes	No√

6.1 Building (Please refer to Clause 8 of NCTE (Recognition Norms and Procedure) Regulations, 2007

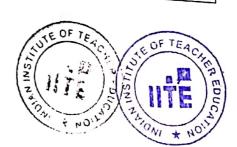
	Description	T	-	511						
	Description	To be filled in by Institution								
	i) Date of approval of the Building plan by the competent authority/State Govt.		D 1	M 0	M 3	Y 1	Y	′ Y	Y 8 9	
1	ii) Date of completion of construction									* Govt. of Gujarat has
	of the building, if already completed	P	D	M	М	Υ	Υ	Υ	Υ	handed over the Building to the IITE for the purpose
Γ	iii) If construction of the building is not									
L	complete, the likely date of completion of construction	D	D	M	M	Υ	Υ	Υ	Y	N.R
á	iv) Name and address of the competent authority for approval of building plan	.Buil Con Dep	ทฑเ	nica					,	
	and issue of completion certificate	Gov Guja	ern	men	tof					
0) Whether completion certificate btained from the competent authority		1		G	over	'nm	ent (constr	ucted Building
) Whether Bldg. disabled –friendly as er relevant laws.							Ye	es	
е) Whether fire safety norms are eing followed.						. [Ye	es	
'ii	i)Total Built up Area (in sq. meter) (in sq.ft.)					.	5		0 4 2 5	0
_										





6.2 Specification of Rooms and other infrastructural facilities

S.No	o. Description	Room	Length	Breadth	Carpet area in sq.
1	2	No.	In meter	In meter	meter
1*		3	4	5	6
		5	7.20	5.35	38.52
2	o des result	5	7.20	6.50	46.80
3,	with purpose Hall	1	11.70	17.70	207.09
4'	manaparpose (Cooffi	1	7.20	5.35	38.52
5	o o minute room rutoriai room	1	7.20	6.5	46.80
6	,	1	11.70	8.50	99.45
7	- moipar moon	1	3.10	5.35	10.26
8*	Administrative office	1	3.10		19.26
9,			3.10	5.35	19.26
	110.0 1.00	1	· 7.20	5.35·	38.52
10	aparte etere recent	1	7.20	5.35	38.52
11'	- The second of	1	7.20	6.50	46.80
12*	* Boys Common Room	-	-	-	
13*	Art & Crafts Room	1	7.20	5.35	38.52
14*	Music Room	-	-	-	Along with multi-
15*	Socially Useful Productive Work (SUPW) Room	_			-Purpose room
16*	Science Lab1 (Physics)	1	7.20	- 10.50	-
	(Chemistry)	1		19.50	140.04
17*	Science Lab2 (Biology)	1	30.30	10.05	318.15
	Ocience Labz (Diology)	'	20.20	10.05	212.10
18*	Psychology lab	1	7.20	6.5	46.80
19*	Educational Technology (ET) /ICT Lab	1	7.20	6.5	46.80
20	Workshop	. 1	7.20	6.5	46.80



S.No.	Description				
1	Description	Room No.	Length In meter	Breadth In meter	Carpet area in sq. meter
	2	3	4	5 .	6
21*	Any other Room/Hall				
	outer Room/Hall	3	7.20	5.35	38.52
22*	Toilets				
	(i) Male	- 3			
	(II) Female	-5	5.35	4.70	25.14
22	Any other for the		5.90	2.14	14.16
+	Any other facility may be specified (Hostel accommodation)	228	5.85	4.35	25.45

^{*} Shared with B.Sc.B.Ed./B.A. B.ED.programme. + Hostel facility is provided over & above buildup area.

7. Instructional Facilities

7.1 Library Total number of Books

7 0 0 0

7.2 Manpower

7.2.1 Academic and Non-Academic Staff (Applicable for existing institutions)

7.2.1.1 Details of Academic Posts available at present

Name of the	Number	Pay Cools		
Post	of Post	Pay Scale	No. of Filled	No. of
	0 00.	AGP: 10 000/	Posts	Vacant Posts
Principal	1	AGP: 10,000/-		
· moipai		PB: 4	1	
Asst. Professor	4	AGP: 6,000/-		
ASSI. FIUIESSUI	1	PB: 3	1	
		Ad-hoc as per Govt.		
Asst. Professor		Norms	4	
			· · · · · · · · · · · · · · · · · · ·	
1				
				1

Working at Centre of Education, IITE, Gandhinagar Institute shall follow NCTE/Govt. norms & regulations, as and when it will be applicable.





7.2.1.2 Details of Non-Academic Staff available at present

Name of the	Number	Pay Scale	No. of Filled	No. of
Post	of Post	, .,	Posts	Vacant Posts
Librarian	1		1	
Computer Lab Assistant	3		3	
Office Manager	1	9300-34800 GP 4200		G.
Office Assistant Cum Data Entry Operator	1	5200-20200 GP 1900	. 1	
Curriculum Lab Coordinator	1		1	
Account Assistant	1	5200-20200 GP 2400	1	
Helpers/Lab Attendant	2 ·		2	

(Some of the staff members shall in sharing B.A./B.Sc. B.Ed.)

8. Arrangement for Games and Sports

8.1 Details of availability of playgrounds

Number of	Length in meter	Breadth in meter	Area in sq mt.
1 laygrounus			
11	456	194.5	88692
2	40	194.5	7780
3	40	46	1840
	Number of Playgrounds 1 2 3	Playgrounds 1 456 2 40	Playgrounds 1 456 194.5 2 40 194.5



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GANDHINAGAR

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