

# Franchise Form

## Institute of Computer Literacy and Training

An Autonomous Institution Reg. Under Indian Public Trust Act. 1882 - Govt of West Bengal.  
Vide Reg. No. IV - 130100031/2023 & Reg. Under MSME Govt of India  
An ISO 9001:2015 Certified Organization

### Candidate Details

Application No.....

\*Please fill the all mandatory fields in the form, Please read carefully before fill the form

\*Applicant Name.....

\*Gurdain Name.....

\*Date of Birth:..... Age.....

\*Gender:.....\*Nationality.....

\*Religion.....Cast.....

\*Email.....\*Mobile No.....

\*Vill/Word.....\*PIN.....

\*P.O.....\*P.S.....

\*District.....\*State.....

### Centre Details

Joining Date.....

\*Name of Training Centre.....

\*Name of Director.....

\*Centre Address.....PIN.....

\*District.....State.....

\*Email.....\*Mobile No.....

## Infrastructure Details

Total Area(Sqf).....Carpet Area(Sqf).....  
No of Rooms(Practical).....  
No of Rooms(Theory).....  
Reception.....Waiting Room.....  
No of Computer.....No of Laptop.....  
Webcam Available  Yes  No  
Broadband Connectivity  Yes  No  
Toilet  Yes  No Drinking Water  Yes  No

## Payment Details

Payment Date.....  
Registration Fee.....Payment Mode.....  
Deposit Bank.....Branch.....  
Transaction/UTR No.....

### Documents Check List:

- ID Proof
- Address proof
- Self Image
- Centre Photo(Optional)

I hereby declare that the above information is true, complete and correct to the best of my knowledge if any information being found false or incorrect at any stage,my application shall be liable to cancellation without any notice.

\_\_\_\_\_  
Coordinator Signature

\_\_\_\_\_  
Candidate Signature