**BRIGHT INSTITUTE OF MANAGEMENT & TECHNOLOGY**

**Run by: BRIGHT FUTURE FOUNDATION TRUST**

**(A National Level NGO)**





**Application For New Admission & Learning Centre**

(This form must be deposited in triplicate and must be filled in CAPITAL LETTERS only)

**Learning Centre Code** **(Given by BIMT, Head Office after Inspection)**…………………………………………

1. Name of the Applicant Person ……………………………………………………………
2. Project Name (In which project participate with us)

…………………………………………………………………………………………….

1. Postal Address with Pin Code (Kindly mention the nearest land mark also)

………………………………………………… City / town …………………………….

State …………………………Pin code ………………… PAN No……………………..

1. Telephone Nos. Office Land-line ………………………… Mobile …………………...

Fax ……………………. Email ……………………………………………………………

1. Name of the Registered Institution/ Society/ Trust (Enclose copy of Registration)

…………………………………………………………………………………………….

1. Address of Institution ……………………………………………………………………..

City / Town ………………………………………………………………………………

State ………………………………………………………. Pin code …………………...

Website (if any) ………………………………………….. PAN No ……………………

1. Name of Director/ President/ Proprietor/ Centre Head of the centre …………………………………………………………………………………………….
2. Profile and Educational details of the individual as stated above

………………………………………………………………………………………………………………………………………………………………………………………………

|  |  |  |  |
| --- | --- | --- | --- |
| Class / Degree / Diploma | University/ Board | Percentage | Year of Passing |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Nominated Co-coordinator / Representative ………………………………………………

Telephone No……………………………………. Mobile….……………………………..

Email ………………………………………………..... Fax ………………………………

1. Current Infrastructure details that is available with you for educational purpose details of premises (Attach relevant Documentary Proof):

|  |  |  |  |
| --- | --- | --- | --- |
| A | Total area of the Institute / centre (in sq. ft.) |  |  |
| B | Total covered area (in sq.ft.) |  |  |
| C | Number of Floor |  |  |
| D | No. of rooms available |  |  |
| E | Power backup |  |  |
| F | No.of computers available |  |  |
| G | Internet facility available |  |  |

1. Whether the land & building are owned by the centre.
2. If the building is rented, enclose the lease/ rent deed of the Institution.
3. Programs applied for authorization

………………………………………………………………………………………………………………………………………………………………………………………………

1. Location of the centre:
2. Remote area Yes No
3. Easily accessible Yes No
4. Residential Area Yes No
5. Commercial Area Yes No
6. Within the city Yes No
7. Nearest Airport …………………………………… Distance ………………………...
8. Distance from Railway Station …………… Name of station …………………………
9. Distance from Bus Stop …………………… Name of stand ………………………….
10. Latest Passport size photograph of Latest Passport size photograph of

 Centre Head Nominee

 **Signature Signature**

1. **DECLARATION**

I / We hereby declare that the detail provided by me / us herein above are true to best my / our knowledge.

Date: …………………….

Place …………………….

Signature of Centre Head

Note: Filling up the above application form does not indicate that the applicant has given the authorization to open the BFFT Learning Centre, its on the sole discretion of the campus after the verification if done by the BFFT officials.

Please provide the following

1. A copy of the Driving License / Voter ID Card / Passport
2. One set of visiting card, Letter Head & Profile of your Institution.

DD Details:

DD No………………………………………. DD Date …………………………….

Drawn on (Bank and Branch …………………………………………………………

Amount (in figures) Rs. ………………………………………………………………

Amount (in words) Rs. ………………………………………………………………

**Approved By Chairman of BFFT**

 Signature & Seal