

Institute Name _____

Director / Principal

Name: _____
 Address: _____

 Phone: _____
 Email: _____

Nominee

Name: _____
 Address: _____

 Phone: _____
 Email: _____

1. Property Institute

Address: _____

2. Teacher Name

Room _____ Institute Code Registration No _____

4. Security Deposit

Amount _____ Agreement. Details _____

Student's for facility

5.

- | | | | |
|--------------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> Water | <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Hostel | <input type="checkbox"/> Refrigerator |
| <input type="checkbox"/> Cable | <input type="checkbox"/> EMI Payment | <input type="checkbox"/> Inverter | <input type="checkbox"/> Dishwasher |
| <input type="checkbox"/> Electricity | <input type="checkbox"/> Play Grount | <input type="checkbox"/> ILaundry | <input type="checkbox"/> Stove and Oven |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Canteen | <input type="checkbox"/> Refrigerator | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Heat | <input type="checkbox"/> Camp Facilities | <input type="checkbox"/> Dishwasher | <input type="checkbox"/> Others _____ |

OTHER'S INSTITUTE

7. Maintenance and Repairs

9. Qualification

10. Others Work

NOTICE

Stuff Verification (Head office)

Board of Secretary Verification
(Head Office)

Principal signature (Institute)

Board of Chairman Verification
(Head Office)