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TYPE OF ORGANIZATION: (✓ Tick whichever is applicable)         Trust       Society         Firm       Company         Other          Year of Establishment:       Registration No.:         Name of Trust/ Society /Firm / Company / Others:													Recent passport size photograph of SC in-charge									
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	Name		Designation	Education		Professional			
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DOCUMENTS ATTACHED WITH THE APPLICATION FORM:
Identity Proof
Residential Proof
Copy of PAN Card
Copy of Documents of Trust / Society / Firm / Company
Two recent passport size photographs
Documents of Qualification
Any other
UNDERTAKING
IS/oR/oSubmitting the application for establishing an Study Centre of SWAMI VIVEKANAND EDUCATION ACADEMY NAGPUR, MAHARASHTRA in the capacity of (Designation) of(Name of the Institution)
<ul> <li>hereby declare and solemnly affirm that:</li> <li>I have carefully read and understood all the guidelines, specification(s) and other information to establish Study Centre of swami vivekanand education academy nagpur, maharashtra</li> <li>I agree to adhere to all the norms, guidelines etc. and to fulfill all the formalities and submit the documents as prescribed from time to time by the swami vivekanand education academy nagpur, maharashtra</li> </ul>
Date: Signature
<u>DECLARATION</u> I hereby declare that the details provided by me herein above are true to the best of my knowledge.
Date:
Place: Signature

Photograph of the Institute:

Photograph of Class Room:

FINANCIAL DETAILS:	
Demand Draft No.:	•
Dated:	
Drawn on (Bank):	
Amount Rs.:	
and Payable at	
(Note: Demand Draft must be in favour Nagpur only)	
For Official use Only:	
1. Study Centre Code:	
2. Authorization Certificate issued on:	
3. Authorized for Session:	
Authorized signatory	
For SWAMI VIVEKANAND EDUCATION ACADEMY NAGPUR, MAHARASHTRA	