

## Application Form

Information of company participating into up-gradation of ITIs into Centre of Excellence under State Sponsored Public Private Partnership Mode

1. Name of Company :  
Year of Establishment :
2. Location :
  1. Village / City :
  2. Taluka :
  3. District :
3. Name of Chairman / Managing Director :
4. Address for Correspondence :
5. Phone No.of Chairman/Managing Director : (O)  
(R)  
(M)  
E-mail Address of Chairman/  
Managing Director
6. Sector of Industry e.g. Information :  
Technology Production & Manufacturing,  
Chemical etc.
7. Annual Turnover and proposed :  
investment (if any)  
(Please attach copy of Balance Sheet)
8. Profit during last 5 Financial Years :  
(Please mention year wise)
9. Total No. of Employees :  
(Please attach separate sheet)
10. Training facility/ infrastructure available at : Availability of infrastructure like  
industry (if any) Class-rooms, Trainer, Audio Visual  
Aids etc.
11. For which I.T.I. company is interested : (1) \_\_\_\_\_  
to be partner under PPP mode in order of (2) \_\_\_\_\_  
Preference (3) \_\_\_\_\_
12. Is your company associated with :  
any reputed Association? Please Mention  
(like FICCI, CII, GCCI.....etc.)

13. Any activity performed for socio-economic up-liftment of people as a corporate Social Responsibility (Please give details in brief)

14. Proposed plan for ITI upgradation :  
(Please attach separate sheet if necessary)

15. What type of Contribution Industry is going to give for ITI ?  
(Please give details in brief)

(a) Financial

(b) Managerial

(c) Physical

(d) Academic

16. What type of Contribution Industry is going to give for Skill / Knowledge upgradation of the faculty / trainer of ITI?

17. Proposed contribution by your industry in terms of Providing industrial experts for training "hands on", Training to trainees, Tools, Equipments and Machineries and Training materials etc.

18. Proposed contribution/ planning by your industry in terms Revenue generation (Earn while you Learn concept ) activities.

18. How ITI will be benefited from your Partnership ?

20. What is your vision for next 10 years?

21. Details of Past Experience as a PPP partner with any firm/Govt. Institute. (if any)

22. Details of PPP Training Project with ITI/Govt. Training Institute. (if any)

Date : \_\_\_\_\_  
Place: \_\_\_\_\_

Sign of Chairman / Managing Director  
Director / Head of Local Unit

Name: \_\_\_\_\_

Company Seal

Note: Please submit/attach all necessary proofs.