बी आई ई टी लर्निंग सिस्टम्स ™

BIET

LEARNING SYSTEMS PRIVATE LIMITED

(An Autonomous Organisation - Recognised by Government of India)

A Global Platform for Technical & Vocational Education, Training and Skill Development

APPLICATION FOR INSTITUTE AFFILIATION

A. INSTITUTE DETAILS

1. Institute Name

2. Year of Establishment

3. Institute Type (Proprietorship / Trust / Society / Company / Other)

4. Complete Institute Address

5. District / State

6. PIN Code

7. Contact Number / WhatsApp

8. Email Address

B. PROGRAMME & PREMISES

9. Course(s) Proposed for BIET Affiliation

10. Premises: ☐ Owned ☐ Rented

11. No. of Classrooms / Seating Capacity

12. Facilities Available (tick as applicable)

☐ Reception ☐ Office ☐ Whiteboards ☐ CCTV ☐ Drinking Water ☐ Toilets ☐ Internet

AFFILIATED BY B I E T - RECOGNIZED BY GOVERNMENT OF INDIA

ISO 9001:2015, EOMS 21001:2018, Accredited by Member of IAF for United Kindom International Accredition Council (UKIAF), Certificate No - QMS/25M6129, EOMS/25M6128

AICTE MEMBERSHIP : MI 2022 HY

MSME REGD MEMEBER TS-02-0065676

NITI Aayog UNIQUE ID : TS/2024/0436372

Skill India कौशल भारत - कुशल भारत TP No.351540

#startupindia DIPP CERTIFICATE NO: 143914

C. Director / Centre Head Profile

13. Name

14. Designation

15. Qualification

16. Proof of ID

- □ Aadhar Card
- □ Driving License
- □ Passport
- □ PAN Card

PHOTO

Declaration:

On behalf of the Institute.....

I .....S/o OR D/o ..... do hereby declare that the particulars furnished above are correct to the best of my knowledge and belief and that I am prepared to undergo any punishment imposed on me if any of the particulars furnished are found to be false and misleading. I also further declare that I shall abide by the conditions, rules and regulation measures imposed by the BIET for granting permission/ affiliation to establish and run this institution. In future I shall never claim any where against BIETas i read out all the information related to BIET

Signatory: _____ Date: _____

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D. DOCUMENTS TO BE ATTACHED

□ Registration / establishment licence (if applicable)

□ PAN and identity proof of owner / authorized signatory

□ Premises ownership proof or valid rent / lease agreement

□ Photographs of building entrance, classrooms and facilities

E. DETAILS OF TRAINING STAFF

Name	Qualification	Teaching Expereince (No. of Years)	Full TIme/ Part TIme	Date of Appointment

F. APPLICANT DECLARATION

I confirm that the information and documents submitted are true to the best of my knowledge. I understand that submitting this application does not constitute BIET affiliation or authorization. Approval is subject to document review, infrastructure verification, applicable requirements and execution of the affiliation agreement.

Applicant Name: _____

Signature & Institute Seal: _____ Date: _____

G. FOR BIET OFFICE USE ONLY

Application Received: ☐ Yes ☐ No Documents: ☐ Complete ☐ Pending

Site Inspection: ☐ Completed ☐ Pending Affiliation: ☐ Approved ☐ Pending ☐ Declined

Remarks: _____

Authorized Signatory: _____ Date: _____