

SRI YOGA & NATUROPATHY INSTITUTE

(A Venture of Sri Educational Group & Sri Educational Society)



(An ISO 9001 : 2008/2015 Certified Organization)

Member of QCI-(Quality Council Of India)

Registered By Govt. of NCT, New Delhi & Govt. of U.P.

Affiliated By Akhil Bhartiya Prakartik Chikitsa Parishad

Regd. By MHRD (Under CR Act), Diary No.-14360/CO/L, New Delhi

Registered Under Micro Small & Mini Enterprises UAN -UP48D0002375

Registered & Licensed in Corporation of Education by Ministry of Corporate Affairs, Govt of India



Visit us :- www.syecce.com

Email : syecce@gmail.com

Application Form for Franchise/ Study Centre

Note: (Kindly fill in English – BLOC LETTER)

- 1-Applicant Photo Attested by Gazetted officer/ M.L.A. / M.P. or Self Attested.
- 2-Last Qualification Marksheet & Certificates /Diploma/Society/Trust/Company Registrations etc.
- 3-One ID Proof Like as- Voter ID, Adhar Card, Pncard, Ration Card, Others.
- 4-Minimum 1000sqft. Area with 3 Computers, 1 Scanner, 1 Printer Etc.

To,
Managing Director of Swami Vivekanand Educational Council of Professional Studies-SVECPS
Sri Educational Society-(SES) & Sri Educational Group-(SEG)
Lakhimpur Kheri, U.P. (India)-262701

SIR,

I/We have taken note of all the rules & regulation of the SES & SEG or SVECPS Operated By Under of SYECCE, SYNISCE, SIMTECH, SOCW. I will abide by the rules and Regulation in the future.

I/We _____ am/are presenting the application form for the establishment of a Franchise of Nursery Teachers Training (NTT) Primary Teachers Training (PTT) Nursery Primary Teachers Training (NPTT) /IGD Bombay Art /Computer Course/Diploma in Yoga & Naturopathy Training.

Name of Applicant(s): _____ Designation: _____

Father's / Husband's Name: _____

Name of Institute: _____

Correspondence Address: _____

Pin Code: _____ Contact No: _____ e-mail ID: _____

Name of Franchise /Study Centre: _____

DECLARATION BY THE APPLICANT

I hereby declare that I have read & considered the condition of the eligibility for the study centre & I fulfill the condition. I have furnished about the necessary information in this record. In the event of any information found incorrect or misleading my candidature shall be liable to cancellation any and I shall not be entitled to get refund any amount paid by me to the Institute. In the event of any dispute it shall be resolved through the mediation of the chairman or a committee constituted under the constitution/ Arbitration Act and its decision shall be binding on all concerned & I will liable the expenses.

Date: _ / _ / _ _ _ _

Signature of Applicant

Encl.: 1. Copy of Photo I.D. Signature of Applicant

DECLARATION

Before The President/Managing Director/Secretary of SRI YOGA & EARLY CHILDHOOD CARE & EDUCATION or Sri Educational Group-(SEG) & Sri Educational Society-(SES) & SVECPS.

I/Shri.....Father's Name.....

Age.....Resident of.....Distt.....

Pin.....

Phone No.....Office.....

E-mail Id..... Website.....

:Declare as Under:

1. Our Organization will work as an FRANCHISER of SYECCE & Sri Educational Society-(SES)Lakhimpur Kheri U.P. INDIA
2. All the Admission/ Examination documents collected from the organization will be kept safely/ confidentially be me & its will be my responsibility for its timely distribution in the centre.
3. That our institute will work according to the rules & regulation of the organization & I agreed with all the rules & regulation of the organization.
4. In no circumstances the enrollment number or exam result will be asked for in the even of the does not being paid to the S.E.G. NEW DELHI & S.E.S. or S.Y.E.C.C.E.,S.V.E.C.P.S. Lakhimpur Kheri , U.P.(India).
5. That I have read and understand the rules & regulation of the Organization and only after complete satisfaction this declaration is being made which when necessary can be made use of for legal purpose. In the event of an dispute will be settled by the committee appointed by the SRI EDUCATIONAL SOCEITY SES/ SRI COMPUTER EDUCATION SRI YOGA & EARLY CHILDHOOD CARE & EDUCATION or SRI EDUCATIONAL GROUP, NEW DELHI, & SRI INSTITUTE OF MANAGEMENT & TECHNOLOGY,SWAMI VIVEKANAND EDUCATIONAL COUNCIL OF PROFESSIONAL STUDIES-SVECPS under the provisions of the Indian Attribution Act 1940 of SEG Or Act 1860 of S.E.S. and its decision will be binding on all concerned & I/ we will Liable to all the expense.

Therefore, I.....declare that time the information furnished in the form for Establishment of centre are true to the best of my knowledge and belief and will remain in force and binding on me and n successor for the Center's association with the organization.

Place:.....

Stamp & Signature of the declarant