



CORPORATE OFFICE SANJAY Nagar A, Kalwar Road Jhotwara, Jaipur 302032 – Rajasthan Mobile: +91-96 02943626 web: www.ncame.com mail: care@ncame.com

APPLICATION FOR CENTRE AUTHORIZATION

1. Name of Institutions / Organizations _____

2. Name of Owner /Director _____

S/o, D/o, W/o _____ D.O.B _____

3. Address of Institutions _____

Village/Town/City _____ P.O _____

Tehsil _____ Distt _____

State _____ PinCode _____ PhoneNumber _____

Mobile Number _____ Email : _____

6. Detail of Centre Infrastructure.

[1] No. of Computers (Required Min. 3 to 5) _____ [2] No. of Chairs _____

[3] Centre Area (Required Min. 100 Sq. Feet to 200 Sq. Feet) _____

[4] Toilet/Urinal Available Yes/No _____ [5] Scanner(Yes/No) _____ [G] Internet Connectivity (Yes/No) _____

7. Number of Faculty Members (Required Min-1).

Sr. No.	Full Name	Qualification

8. Franchise Authorization Fee – Payment Details.

Payment Details.	INR	Date

9. Applying For Which Franchise

Basic	Standard	Premium	Business
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Signature of Centre Head

Date of Submission.....

Franchise Centre Head Profile



You shall not without Our prior written consent assign, transfer, charge, sub-contract or deal in any other manner with all or any of your rights or obligations under these Terms.

We may at any time assign, transfer, charge, sub-contract or deal in any other manner with all or any of Our rights or obligations under these Terms.

Full Name	
Date of Birth	
Gender (Male/Female)	
Permanent Address	
Qualifications (Attach Copies of Certificates)	
Experience (If any)	
Mobile Number	
Email-ID	
Centre Mobile Numbers	
Fax	
How Find Ncame	
About Company	
Tell About Your Self	

Signature of Centre Head

Date of Submission.....



Terms and Conditions

I/We _____ S/o, D/o, W/o _____

Age _____ R/o _____

Address _____ Pin _____

Mobile Number _____ Email _____

I HAVE READ AND UNDERSTAND THIS AGREEMENT, AND I ACCEPT AND AGREE TO ALL OF ITS TERMS AND CONDITIONS.

- 1. I have Established Centre at _____
- 2. Name of My Franchise is _____
- 3. That I/We, have Established Above Mentioned Institute on (Date and Time) _____
- 4. That I/We have Fulfilled all Requirements to Run Authorised (Write Your Franchise Plan) _____ Centre Under NCAME **TERMS AND CONDITIONS**
- 5. That NCAME issue the Franchise Authorization to Run Abovementioned Zone's Courses and Ncame Services, For Abovementioned Single Location of My Franchise and The Same Franchise Authorization Shall NOT Applicable to Different Locations. I should Separately Submit New Application for Franchise Authorization for that Franchise at Different area.
- 6. That I should stay at risk for each Due towards NCAME in each situation.
- 7. That NCAME has no partaking in understudy Admission charge/educational cost expense/exam charge and all said charges will be recommended/chosen by me/us in my/our middle according to venture, framework offices, understudy and educator proportion, backwardness and topographical state of my/our range. NCAME might not be considered mindful if any debate emerges for said expenses and I/We should be exclusively subject for the same. NCAME might charge onetime ostensible enlistment expense according to the length obviously/s per unders tudy/s.
- 8. That NCAME should not contribute/has not put resources into my Franchise set up, So all Investments, co sts and conventions identifying with operation of my/our middle might be overseen and borne by me/us, for example, PC frameworks, focus furniture, focus educator's pay, focus building (leased/self-claimed), instructive lawful Software's, Center Audit, Center ITR, Center Taxes (assorted types), neighbourhood level NOC and so forth.
- 9. That I/We should get understudy/s confirmation/declaration by means of post at my/our middle/postal location, which are affirmed/issued under Training Program of NCAME.
- 10. That a wide range of instalments paid, to be paid to NCAME, should not be refundable regardless, at all.
- 11. That NCAME should not be at risk for any dedication or any plan or any promotion or tie-up, with understudies, govt., corporate, colleges, open and different associations of same nature, which I/We keep running on my/our own level in my/our middle.
- 12. That I/We discovered include in any criminal, money related, social or some other offense then the approval of my/our inside might naturally arrive at an end.
- 13. That the approval of My /Institute should be legitimate from _____ & the same might be recharged in the month of March each year (prior to 31st of said Month) in the event that I/We satisfy the condition connected for the said reestablishment.
- 14. That NCAME might have full right to redesign/alter/change/include, any tenets and controls relating to my/our middle affiliation/approval/actuation with NCAME.
- 15. That I/We have perused and comprehended the guidelines and directions of the NCAME and acknowledge the same. If there should arise an occurrence of encroachment/rebelliousness by me/us, of any standards and controls made in any application/structure/report/re cord/page of sarvaindia.com of NCAME, then, Director of NCAME might have full right to take choice upon further actuation/approval of my/our inside and in such manner, his choice might be adequate to me/us.

16. We may edit, delete or modify any of the terms and conditions contained in this Agreement, at any time and in our sole discre tion, by posting a notice or a new agreement on our site. YOUR CONTINUED VISIT IN OUR WEBSITE FOLLOWING OUR OSTING OF A CHANGE NOTICE OR NEW AGREEMENT ON OUR SITE WILL CONSTITUTE BINDING ACCEPTANCE OF THE CHANGE.

Simply after Complete fulfilment, this Declaration is being made which can be utilized for lawful purposes as and when important against me/us. In case of any debate/matter, it will be settled by the board of trustees designated by the NCAME and its choice will tie on all concerned or at the court Jodhpur Rajasthan and I/we will be at risk to every one of the costs.

In this manner, I/we _____ Hereby announce and acknowledge that the data outfitted in this Declaration from and the data outfitted in the Application for Franchise Authorization and Franchise head Profile for running courses under Training Program of NCAME are consistent with the best of my/our insight and conviction and will stay in power, restricting and worthy on me/us, my/our successor for the time of my/ou r middle's relationship with the NCAME

Signature of Declarant	Left thumb Impression	Date and Time
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