

[Format for cover letter - on Letterhead]

Proposal for Empanelment as Training Partner of MANAS under the Skill Development Programme of Maulana Azad National Academy for Skills "MANAS"

(Location, Date)

To,
The Secretary,
Maulana Azad National Academy for Skills (MANAS),
NMDFC,
Ministry of Minority Affairs, Govt. of India,
Core I, First Floor, Scope Minar, Laxminagar,
Delhi - 110092

Subject:- Proposal for Empanelment as Training Partner under the Skill Development Programme of "MANAS".

Sir,

I, the undersigned, hereby furnish our proposal for empanelment in the prescribed application format as training partner of MANAS.

2. I accept the terms & conditions prescribed in the guidelines for selection of Entities based on essential criteria.
3. Further, I agree to abide by the directions of the "MANAS" in this regard, if selected as training partner. I understand that MANAS reserves the right to accept or reject any proposal.

Yours Sincerely,
Signature:
Name of Authorized
Signatory of organization
Address:
Official Seal:

Encl. The duly filled in application form along with the enclosures.

Application Form for Empanelment as a Training Partner with MANAS

General Instructions:

1. Annexure/attachments/documents can be annexed, with reference to the columns of the application form, wherever needed.
2. Copies of all the relevant documents should be necessarily attached with application form.
3. Please self-attest each page of the document, annexure etc. attached with reference to various columns of the form by signing & stamping each page.
4. Proposals along with the enclosures should be indexed and pages be numbered.

1	Name of the Organization	
2	Legal Status (Registered Society/Govt./Semi-Govt./Public Sector/Autonomous Body/NGO etc.	
3	Registration No.	
4	Area of Operations/ Business Activities	
5	Year of Establishment	
6	Names of the Directors/Office Bearers	
7	Regd. / Head Office Postal Address	
8	Phone No.	
9	Fax No.	
10	Mobile Phone No.	
11	Email ids	
12	Website address	
13	Name of Authorized Representative	
14	Designation	
15	Contact Details of Authorized Representative	
16	Details of Payment of Non-refundable amount of Rs. 25000/- as application money	DD/banker's cheque drawn in favour of "Maulana Azad National Academy for Skills" payable at New Delhi.

1. Brief History of the Organization and current nature of business area and set of skills in which the entity has the capacity to impart quality training with MANAS -

2. Prior exposure of the Institution in Skill Development Area:*

Year	Government Sponsored Schemes/Independent Training Details	Location	Skilling Stream/trades	No of Beneficiaries Trained	No of Beneficiaries Placed	Name of the institution where beneficiaries placed

**3. PAN No. and TAN No. of the Institute: _____
(Attach photocopy of the PAN card and last IT return as Enclosure)**

4. Does the Institute have branches? _____
 (If yes, please furnish the details as per the format given below)

Branches/Center Details					
S. No.	Address of the Branches/Center	Contact Person	Landline & Mobile No	Courses being Run	Center Status (Franchise / Own)

5. Turnover of the Entity:* _____
 (Attach audited balance sheet preferably for the last 3 years as Enclosure)

6. Does your Institution have as "Operations Manual"? _____
 (If yes, attach the copy of Operations Manual as Enclosure)

7. Details of the Human Resource for Skill Training:*
 A. Details of Trainer/Academic Staff

S. No.	Name of Trainer/ Demonstrator/ Operations/ Supporting staff	Designation	Contact No.	Academic Qualification	Technical Qualification	Industry Experience	Employment Status (Regular/ Contractual/ Part Time)	Salary Bank Account Details

(Attach resume of trainers/demonstrators along with all contact details as Enclosure)

- B. Details of operational staff & demonstrators for practical training

S. No.	Name of Operations/ Supporting staff	Designation	Contact No.	Academic Qualification	Technical Qualification	Industry Experience	Employment Status (Regular/ Contractual/ Part Time)	Salary Bank Account Details

8. Details of proposed area to impart the training -

State/District	Blocks/District where centre will be established	Detailed description of skill training to be imparted	Training outcome - Placement - Wage in terms of tentative employer / Self Employment

9. **Have the Trainers/Demonstrators undergone any specialized training? Is there qualification/experience as per industry norms for specific skills training - i.e. SSC/NSQF/DGET or any other industry body? _____**
(If yes, attach the Details of the training as Enclosure)

10. **Details of the Curriculum of the all the courses offered. Certify the existence of the aspects listed below which will have to be physically produced to the affiliation assessors:***

Aspect	Yes/No	Remarks
Process of adoption and/or development of curriculum on the basis of SSC/NCVT/NSQF developed by the regulatory bodies		
Review process to gauge the effectiveness of the curriculum developed		
Clear demarcation of time for theory and practical portion of training as per the criteria set by regulatory bodies		
Pedagogy inclusive of time schedule and lesson plan		
Process of SME engagement in curriculum design and development		
Review process for approval of curriculum from the regulatory bodies		

11. Physical Infrastructure of the center as per the minimum standards prescribed by the certifying agency:*

S. No.	Particulars	Status	Proof
1	Ownership of the building - Own/Rent		Attach self-attested photocopy of documentary evidence as enclosure
2	Area of Institute Premises		Attach schematic building plan with clear marking of dimensions as enclosure
3	Class rooms (in number)		
4	Domain labs (in number)		
5	IT labs (in number)		
6	Reception room		
7	Office room		
8	Counselling rooms		
9	Separate toilets for Boys and Girls		
10	Safe drinking water		Attach photographs as enclosure
11	Power backup		Attach photographs as enclosure along with details
12	Installation of Biometric devices for attendance of Trainers/Trainees		Attach photographs as enclosure along with technical specifications
13	Installation of CCTV cameras For live coverage of training – Theory/practical		Attach photographs as enclosure along with details of internet connectivity/ broadband etc.

12. List of Critical tools & equipment as per the minimum standards prescribed by the certifying agency:*

S. No.	Trade	Name and description of Equipment	No.
1	Trade 1		
2	Trade 2		

(Same Pattern will be followed for all the trades)

13. Prospective Placement Employer Details:*

S. No.	Name of Employer/ Placement Agency	Sector	Requirement of Skilled Man power	MoUs/Tie-up Letter (Yes/No)

(Attach placement MoUs/Tie-up letters as Enclosure)

* The entity should furnish self-attested certificate **on non-judicial stamp paper** to the effect that whatever information, claims, documentation etc. have been furnished by it are true. MANAS reserve the right to initiate legal action, if any discrepancy or false information found at any stage and can black list the entity.

S. No.	List of Enclosures	Yes/No
1	Registration Certificate	
2	PAN and IT Return	
3	Audited Balance Sheet	
4	List of Branches	
5	Copy of Affiliation Certificate	
6	Building Approval Document	
7	Resume of training & other staff	
8	Operations Manual	
9	Course Curriculum & Session Plan	
10	Placement tie-up letters/MoUs	
11	Copy of MoU with Assessment Agency	
12	Copy of Rent Agreement/Ownership Paper	
13	Copy of Schematic of the building plan	
14	Photographs of Centre	
