

APPLICATION FOR AWARDING BODY (DUAL CATEGORY)- Higher Education Institutions (HEIs)

Part A: Basic Details of the Organization

S. No	Parameters	Details by the applicant entity
1.	Name of the HEI	
2.	Complete Address of the HEI	
3.	Year of Establishment of the HEI	
4.	Website URL	
5.	Category of the HEI (Deemed/Autonomous/ Other)	
6.	Present NAAC Grade, if any	
7.	Present NIRF Ranking, if any	
8.	Specialization of the HEI (Technical/ Sciences/ Humanities/ Commerce/ Multi-Disciplinary/ Any other specialization)	
9.	Jurisdiction of the HEI as per Statute/Act	
10.	Details of the Head of the HEI (a) Name (b) Email id (c) Mobile Number	
11.	Details of the Nodal Officer of the HEI for dealing with NCVET (a) Name (b) Designation (c) Email id (d) Mobile Number	
12.	Jurisdiction Applied for by the HEI (in case different from S.No 9)	
13.	Skill based Programs/Courses offered at present, if any: a) As part of curriculum b) As Standalone (not part of curriculum) along with the NCrF level, as applicable	

B. Cover Letter- to be sent along with the application

(Date)
Dear Sir/Madam

Sub: Application for NCVET Dual Recognition

I represent (*Name of the applicant body*) and have the legal authority to ensure commitment of my organization to uphold the requirements and conditions of NCVET recognition. I, hereby acknowledge that all the requirements and conditions under the Eligibility & Continuation Criteria mentioned in the Guidelines and Operational Manuals for recognition and regulation of Awarding Body and Assessment Agency respectively have been read and duly acknowledged.

I, the undersigned, will also ensure that the organization acts in accordance with the Guidelines and procedures detailed in the NCVET Guidelines. I understand that the NCVET absolves itself of any legal or financial liability arising out of any act involving any accidental or consequential damage to personnel/equipment at any time.

I am aware that the terms and conditions of NCVET recognition may be amended from time to time and that the updating of the same on the website and in writing shall constitute due notice. I understand that it is the responsibility of the applicant organization (*name of organization*) to review these terms and conditions in order to maintain compliance.

Signed
(Name and Position)

On behalf of (name of organization)

**C. The organization must submit the following documents
for Dual Category Recognition**

1. Legal Status

S. No	Name of Document	Mandatory/Optional
i.	Certificate of Registration and/ or Article of Incorporation/Act	Mandatory

2. Prior Experience

Number of learners trained, certified, and placed with details of geographical spread of the organization for the past years in the format (table a and table b)

a. General Diploma/Degree Programs

Year	TRAINING DATA					ASSESSMENT DATA*
	Enrolled	Trained	Assessed	Certified	Total	
Year 1						
Year 2						
Year 3						
Total						

b. For Skill based programs/ Courses

Year	TRAINING DATA					ASSESSMENT DATA*
	Enrolled	Trained	Assessed	Certified	Total	
Year 1						
Year 2						
Year 3						
Total						

**data for training and assessment should be mutually exclusive. If the same number has been trained and then assessed then that would be counted as only one case and not two.*

3. Credibility and Industry linkages (for each sector separately)

3.1. Availability of Departments/Schools in the HEI with respect to the sector being applied for

S. No	Sector applied for	Concerned School /Department Available

3.2. Details of Engagement of members from relevant industry as subject matter expert/ professor of practice (Mandatory)

S. No	Name	Sector	Prior Experience	Tenure of engagement

3.3. Details of MoUs with industry partners from the relevant sector (large, medium, and small enterprises) (Mandatory)

S. No	Name and address of the industry partner	Name of the Head of the Industry partner	Sectoral expertise of the industry	Tenure of collaboration (start date and validity)	Specific areas of collaboration

4. Qualification related (Mandatory)

Have the HEI developed skill-based qualification/s? If yes, provide the process for creation, withdrawal of Skill based qualification.

5. Provide an undertaking for the following (Mandatory)

- a) Availability of requisite infrastructure required for conduct of training in a qualification.
- b) Availability of IT infrastructure as owned/hired by the organization.
- c) Availability of data system & security of ecosystem
- d) Availability of well-defined governance process associated with assessment.
- e) Availability of defined Process of assessment planning and delivery
- f) Availability of robust Data management systems

6. Governance and Manpower

6.1. Functional Organogram of the HEI (Mandatory)

6.2. Details of BoM (Mandatory for non-Government HEIs)

S. No	Name	Contact number	Email	Designation	Employed since	Education and Experience	Role & Responsibility

7. Assessment Related Functions (Mandatory)

7.1. List of assessors/examiner/proctors (separate for each category)

S. No	Name	Highest level of education/ skilling achieved	Certified (Yes/NO)	Tenure of engagement	Joining date	Sector

7.2. Subject Matter Expert (SME) Details

S. No	Name	Sector	Prior Experience	Tenure of engagement

7.3. List of staff (other than assessors/examiner/proctors and SME) involved in assessment and

monitoring.

7.4. Accessible Assessment Tools

Name of courses offered	Name of the assessment tools	Availability in national language (Yes/No)	Accessible for PwD (Yes/No)	Alternative for PwDs	Remarks (if any)

8. Whether HEI is compliant to Institutional Development Plan (IDP)

Part D: Authorization Statement of the Organization

I, represent the ... (name of the HEI), confirm the following:

- That the information contained in this application and all supporting evidence is correct and accurate, the property of the organization and that it reflects the organization's business practice to the best of my knowledge.
- That this organization has not been blacklisted by any ministry, department, agency or undertaking of the central or any state government, nor has it at any time been indicted for corrupt and/or fraudulent practice.
- That I have never been involved in a business/institution which has been blacklisted by any ministry, department, agency or undertaking of the central or any state government, nor have I ever been indicted for corrupt and/or fraudulent practice or of an offence against the law.
- That neither the organization nor I have linkages with other organizations or individuals which might constitute a conflict of interest.

Signature of Nodal Officer:

Date

Office use only

Application checked by	
Registration No	
All required information provided	
Follow up action	
Date	

