

Re-Accredited by NAAC with 'A' Grade

VEER NARMAD SOUTH GUJARAT UNIVERSITY

University Campus, Udhna-Magdalla Road, SURAT - 395 007, Gujarat, India.

વીર નર્મદ દક્ષિણ ગુજરાત યુનિવર્સિટી

યુનિવર્સિટી કેમ્પસ, ઉધના-મગદલ્લા રોડ, સુરત - ૩૯૫ ૦૦૭, ગુજરાત, ભારત.

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APPLICATION FORM

(for NOC / Consent of Affiliation to start new programme in VNSGU)

PRIMARY INFORMATION: 1.

1.1	Name and address of the applicant Society/ Trust.				
	Trust Name:				
	Address:				
		Pin code :			
	Name of Chairman/ President/ Secretary:				
	Phone No. with STD Code:	Mobile :			
	E-mail :				
	Website :				
	Year of Establishment & Registration No.				
1.2	Name and address of the Name:	College/ Institution or proposed College/ Institution.			
	Address:				
		Pin Pin code :			
	Code.	Mobile :			
	E-mail				
	Name of the Director/Principal				

Name of the District in which the proposed site is Located. Detail of existing education institutes run by the trust:								
Sr. No.		f College/ e/School, etc.	Name of Affiliated university/board	Year of establishment	Remarks			
Name	of Cours	e / Programme		s required)				
Gover	nment		Grant-in-Aid	Self F	inance			
Have you applied earlier for this course from this University?								
Have								
	give the	details of an	nlication date fees	naid and univers	ity's final d			
Name of Course / Programme (for which NOC is required) Type of Course/ Programme (Tick in appropriate box): Government Grant-in-Aid Self Finance								

3.1	Location	Urban		Rural	
3.2	Area:	Acres			
3.3	Name of Di	strict :			
	Whether this	land owned by t	he applicant	Society/ Trust No	
	ase note that lea lations.)	se land is not acc	eptable exce	pt in case of lease by the government as per	
(i)	Ownership of land (whether rented / leased / fully Owned)				
(ii)	Prescribed Land use (whether conforming / non- conforming to Master Plan)				
3.4 Whether the land is registered through a Society for proposed College/ Institution				ale Deed in the name of the Applicant	
		Yes		No	
	If yes,				
	Registration	Number:		Date of Registration:	
	Place of Reg	istration:		(Please enclose copy of the sale deed.)	
3.5	If the land is on lease from Government, purpose for which it was leased and period or lease granted.				
	(Please enclo	se copy of lease of	deed)		
3.6	Whether any loans/ mortgage raised against the titles of the above land				
		Yes		No	
3.7	Whether the by any resolu		clusively ear	marked for the Proposed College/Institution	
		Yes		No	
	If Yes, attach	copies.			
3.8		is agricultural. Yes		No	
	if no (attache	d conversion cert	ificate from	Local Government / Competent Authorities	
	Land survey	N. T.		belongs to	

3.

4. Any other information which the application.	Any other information which the applicant may like to furnish in support of the application.				
	UDERTAKING:				
	e & correct to the best of my knowledge and belief and				
is based on facts. No material has been co	oncealed / misrepresented therein. If any information				
furnished above is found to be false or mislead	ing, concealed or suppressed, undersigned will be liable				
for the consequences thereof. The College /	Institute is bound to obey norms of University, State				
Government, UGC / Concerned Council from t	time to time.				
Signature :	Signature :				
Chairman/ Secretary of the Society/ Trust	Principal of the College / Institute				
Name :	Name:				
Designation:	Designation :				
Dated:	Dated :				
Seal of the Society:	Seal of the Institute:				