

Maharashtra Knowledge Corporation Limited

Digital College Information Form

a. Basic Information of the Institute / Organization

I. Type of the Institute :

College University Department Institute

II. Name of the College / University Department / Institute

III. Minority Status

Minority Non-Minority

IV. Minority Type

Religious Linguistic

- If minority type is on the basis of religion, then specify religion type below

Buddhist Christian Jain Muslim

If any other religion than mentioned above _____

- If minority type is on the basis linguistic, then specify linguistic type below

Gujarati Hindi Kannada Urdu

If any other language than mentioned above _____

V. Institute / Organization Status Type

Affiliated Constituent Conducted

VI. Parent Body of the Institute / Organization

Government Registered Society Charitable Trust

If Parent body is Registered Society / Charitable Trust?

Mention Name of Registered Society / Charitable Trust

VII. College / University Department / Institute Education is

Only for Boys Only for Girls Both for Boys and Girls

VIII. Address Details:

Taluka: _____

PIN - _____

IX. Contact Details

STD Code: _____

Phone No. 1 _____

Phone No.2 _____

Phone No.3 _____

Maharashtra Knowledge Corporation Limited

Fax No.1 : _____ Fax No.2: _____
Mobile No.1: _____ Mobile No.2: _____
Email ID 1: _____
Email ID 2: _____
Email ID 3: _____
Website Address _____

b. Registration Information of the Institute

Date of Establishment: _____
College Code (Given by Examination Section of University) _____
Affiliation Code (Given by Affiliation Section of University) _____
Affiliation Letter Details: _____

Sr. No.	Description	Number	Date of Letter
01	University Letter to State Government		
02	UGC Recognition Letter under 2F		
03	UGC Recognition Letter under 12B		

(Note: The Institute must submit attested Photocopies of above letters)

c. Geographic Information

Area of Location

Urban Semi-Urban Rural Tribal

Name of Nearest Railway Station _____ Dist. _____ km

Name of Nearest Bus Station _____ Dist. _____ km

Name of Nearest Airport _____ Dist. _____ km

Longitude _____ Latitude _____

Altitude _____

(Note: Collect photograph of Main Building of Institute)

d. Accreditation Information

Accreditation Body Name _____

Accreditation Status / Level _____

Accreditation Date _____

Address of Accreditation Body:

Maharashtra Knowledge Corporation Limited

State: _____

District: _____

Tahasil _____ Village / Town / City _____

Area: _____ PIN: _____

Phone No: _____

Fax No: _____

Mobile No: _____

Email ID: _____

Website address: _____

(Note: Collect photocopy of Accreditation certificate)

e. Other Information

Vision: _____

Mission: _____

Goals: _____

f. Society/Trust Information

1. Society/Trust Name

Maharashtra Knowledge Corporation Limited

2. Chairman Name

3. Secretary Name

4. Society Description

(Note: Fill the information about basic motive/objective to start College/Institute)

5. Registration No:

6. Registration Date:

7. Establishment Date of College/Institute

8. State:

9. Tahasil:

10. Village/Town/City

11. Area:

12. PIN:

13. Phone Number 1 of the Society:

14. Phone Number 2 of the Society:

15. Fax Number of the Society:

16. Mobile Number (Chairman):

Mobile Number (Secretary):

17. Email ID:

18. Website Address

g. Affiliation Details

Affiliation Type: Temporary

Permanent

(Note: Period of Affiliation for Temporary/Permanent affiliation must be mentioned)

Affiliation Expiry Date:

Maharashtra Knowledge Corporation Limited

Other Information:

Name of Principal/Director/HOD: _____

State: _____ **District :** _____

Tahsil : _____

Village/Town/City: _____

Residential Address: _____

PIN: _____

Resi Phone No. 1: _____

Resi Phone No. 2 : _____

Mobile No. 1: _____

Email ID 1: _____

Email ID 2: _____

Name of Office In charge: _____

Designation: _____

State: _____ **District :** _____

Tahsil : _____

Village/Town/City: _____

Residential Address: _____

PIN: _____

Resi Phone No. 1: _____

Resi Phone No. 2 : _____

Mobile No. 1: _____

Email ID 1: _____

Email ID 2: _____