KERALA STATE RUTRONIX

PADMASREE, C-11, Elankom Gardens, Sasthamangalam P.O, Thiruvananthapuram – 695 010
Mobile No.90721 51980 email: md@keralastaterutronix.com

APPLICATION FOR AUTHORISED TRAINING CENTER (ATC)

☐ SOFTWARE   ☐ HARDWARE   ☐ MULTIMEDIA

(To view the details of streams, click on the respective stream)

☐ **New ATC**

ONLY FOR NEW APPLICANTS / (Fill up in CAPITAL letters only)

I. **Name & Address of Training Centre**

i.	Name of Training Centre	:
ii.	Short Name (if any)	:
iii.	Building Name /No.	:
iv.	Place	:
v.	Post Office	:
vi.	District & PIN code	:
vii.	Phone (Off) & Mobile	:
viii.	Email id	:
ix.	Latitude & Longitude up to 4 decimal	:

Photo of Director/Owner

II. **Name & Address of Owner/Director/Partner(s)**

i.	Name	:
ii.	House Name/No.	:
iii.	Place	:
iv.	Post Office	:
v.	District & PIN code	:
vi.	Phone (Land) & Mobile	:
vii.	Email id	:

III. **Location Details**

Sl.No	Description	Name	Distance (km.)
1.	Nearest Bus Station		
2.	Nearest Railway Station		
3.	Panchayath/Municipality/Corporation		

IV. Detail of Existing Affiliations if any,

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V. Internet Connection Details Yes ☐ No ☐

    I. Type of Connection   :   Broad Band

    ii. Service Provider   :

VI. (a) Details of Computer Lab

    i. Number of Computers: ☐   ii. Number of Seats *: ☐   iii. Number of Lab Assistants: ☐

        (* A seat means 1 Table/Desk + 1 Chair +1 Computer or Computer Terminal)

VI.(b) Class Rooms

    I. Number of Class Rooms: ☐   ii. Total area of Class Rooms: ☐ sqft

    iii. Total number of students could be accommodated at a time: ☐

VII. Details of Peripherals & Accessories

Sl.No.	Peripherals	Type	Quantity	Capacity
1	Printer	Dot matrix		
		Laser		
		Color		
2	Scanner			
3	UPS			
4	Stabilizer			
5	Web Camera			
6	CD/DVD Writer	Built in		
		External		

VIII. Library   Exists ☐   Does not Exist ☐

    I. Number of Technical Books in the collections ☐

IX. Faculty Details

Sl.No.	Designation	Name	Qualification (Computer) *	Date of Joining	Subjects Handling
1	Academic coordinator				
2	Academic counselor				
3	Chief. Faculty member				
4	Dy Chief. Faculty member				

* Attach Photocopy of certificates

X. Summary of Qualification Of Faculty Members

Sl.No	Qualification	Number
1)	B-Tech/ M-Tech	
2)	MCA	
3)	PGDCA	
4)	DCA	
5)	Degree	
6)	Provisional Certificates	

XI. Audio Visual Equipment

Sl.No	Item	Number of Items
1)	PA System	
2)	OHP	
3)	LCD Projector	
4)	White Board	
5)	Black Board	
6)	Time Table Board	
7)	Notice Board	
8)	Name Board	

XII. Attach Photographs of the followings

(1). Photos of the Building - Outside with Name Board

- Class Rooms

- Computer Labs

- Library

- Reception

- Staff Room

Actual Dimensions of Facilities (See Reference at the end of this Form)

Room No	Room Name	Size(feet)	Area(sq.ft)	No.of Seats	No.of ceiling Fans
Room 1	Library				
Room 2	Waiting Room				
Room 3	Director				
Room 4	Reception				
Room 5	Lab				
Room 6	Class Room				
Room 7	Ladies Toilet				
Room 8	Gents Toilet				
	TOTAL AREA (Sq ft)				

Declaration

I / We hereby declare that the terms and conditions have been read thoroughly and the contents of this submitted application is true and correct.

Signature with Date and Seal of the Centre Director

Send by Post to :

The Managing Director
Kerala State RUTRONIX
PADMASREE, C-11, Elankom Gardens,
Sasthamangalam P.O, Thiruvananthapuram – 695 010

For Reference :

Desired Dimensions of Facilities

Room No	Room Name	Size(feet)	Area(sq.ft)	No.of Seats	No.of ceiling Fans
Room 1	Library	20 x 20	400	x	1
Room 2	Waiting Room	10 x 20	200	x	1
Room 3	Director	8 x 10	80	x	1
Room 4	Reception	8 x 10	80	x	1
Room 5	Lab	30 x 20	600	12Terminals	a/c
Room 6	Class Room	24 x 24	576	20 Seats	4
Room 7	Ladies Toilet	8 x 4	32	x	x
Room 8	Gents Toilet	8 x 4	32	x	x
		TOTAL	2000		