Yashwantrao Chavan Maharashtra Open University, Nashik
Dnyangangotri, Near Gangapur Dam, Nashik-422 222,

Application Form
(*For Colleges affiliated to Board/University*)
Computer Study Centre
Year: _____

Affix recent Photo Of the Principal of College	Affix recent Photo Of the Co-ordinator
Principal	Coordinator

(**Note:** Read the Study Centre Information Booklet 2015 before filling the application form.)

1.0	Which Category of Computer Programmes you are applying for?		
	Category	**Programmes**	**Answer**
1.1.	B	Degree Programmes (BCA, BSc (BIS) and All Certificate and All Diploma Programmes	Yes/No
1.2.	C	All Certificate and All Diploma Programmes Only	Yes/No

2.0	Information of the Institute Applying for Study Centre	
2.1.	Name of the College	
2.2.	Address	
2.3.	City/Town	
2.4.	Tehsil	
2.5.	District	
2.6.	State	
2.7.	PIN Code	
2.8.	Telephone with STD Code	Office:
2.9.	FAX Details	
2.10.	Email Address	
2.11.	Affiliated to University/Board	
2.12.	Approval Number and Date?	No: Date:
2.13.	Type of Affiliation	Temporary / Permanent

2.14.	Expiry Date of Affiliation (if any)	
2.15.	Is the college already a Study Centre of YCMOU for any other Programme?	If yes: Study Centre Code: _____
2.16.	Number of teaching staff (fulfilling YCMOU criteria)	
2.17.	Number of non-teaching staff	
2.18.	Name and distance of the nearest active YCMOU Computer Study Centre (in km)	

3.0	Information of Parent Organization	
3.1	Name of the Parent Organization	
3.2	Address	
3.3	City/Town	
3.4	Tehsil	
3.5	District	
3.6	PIN Code	
3.7	Telephone with STD Code	Office

4.0	Constitution of Parent Organization	
4.1	Legal status of Organization (Public Trust Act 1950/ Societies Registration Act 1860/ Government Body)	Status: Registration No: Date of Registration:
4.2	Name of the Chairman	
4.3	Number of Colleges/Institutes run by the Parent Body	

5.0	Information of the Principal	
5.1	Name of the Principal	
5.2	Residential Address	
5.3	Phone with STD Code	Office: Residence:
5.4	Mobile No	
5.5	E-Mail Address	

6.0	**Information of the Coordinator**	
6.1	Name of the person who will work as coordinator	
6.2	Residential Address	
6.3	Phone with STD Code	Office:
		Residence:
6.4	Mobile No	
6.5	E-Mail Address	
6.6	Date of Birth	
6.7	Date of joining the College	
6.8	Educational Qualification (Enclose necessary true copies of certificates)	
6.9	Experience (Enclose necessary true copies of certificates)	Teaching ……………… years Professional …………..years
6.10	For any urgent need for contact, provide details of Phone Number of friend / relative	Friend 1: Friend 2: Relative 1: Relative 2:
6.11	Any special achievement or award	

7.0	**Details of Computers**
7.1	Provide the details as specified in Appendix-A

8.0	**Details of LAN, Printers and other Peripheral Devices**
8.1	Provide the details as specified in Appendix-A

9.0	**Details of Internet Account**	
9.1	Name of Service Provider	
9.2	Type of account (Broadband / ISDN / Dial-up / Leased Line)	

10.0	**Details of Teaching Aids**	
No.	Name of the Equipment	Quantity
10.1	Television Set	
10.2	LCD Projector	
10.3	Other Equipments (Specify)	

11.0	**Details of Office Space**
11.1	Provide the details of office space as specified in **Appendix-B**

12.0	**Details of Furniture and other Infrastructure**
12.1	Provide the details of furniture and other infrastructure as specified in Appendix-B

13.0	**Details of Staff at the study centre**
13.1	Provide the details of staff as specified in Appendix-B

14.0	Details of Accreditation and Membership of other organization	
14.1	Provide details if your centre is accredited to some organization.	
14.2	Provide details if your centre has membership of some organization like CSI.	

15.0	Details of Affiliation / Partnerships	
15.1	Affiliation with University	
15.2	Affiliation with Government Agency	
15.3	Affiliation/Partnership with Private Training Institute	

The information filled in the Application Form is true to the best of our knowledge.

Date: Seal of the College   Name and Signature of
                                                          Principal

Appendix-A

Computers: Provide details of computers, which will be made available for YCMOU Study Centre by the college

Sr. No.	Machine Type Desktop / Laptop	RAM	Hard Disk Capacity	Monitor Type	CD / DVD Drive	Version of Operating System	Number of Computers
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							
21.							
22.							
23.							
24.							
25.							
26.							
27.							
28.							
29.							
30.							

LAN: Provide details of LAN setup at the Study Centre

Type Client/Server Peer-to-peer	Network operating system	Number of computers on LAN	Make of HUB / Switch	Number of ports on HUB / Switch	Speed of HUB

Printers: Provide details of printers available at the Study Centre

Sr. No.	Printer Type (Inkjet or laser)	Make	Model
1.			
2.			

Details of Other Devices

Sr. No.	Device Type	Details
1.	UPS	
2.	Generator	
3.	Scanner	
4.	Video Projector	
5.	Stabilizer	
6.	Internet (speed)	
7.	Name of Internet Service Provider	
8.	Digital Camera	

Date: Seal of the College   Name and Signature of Principal

Appendix-B

Office Space: Give the details and enclose the true copies of the layout of the space in the college, which will be utilized as the Study Centre purpose with dimensions. Also enclose Ownership/lease/rent documents.

Table-A

Details of Computer lab	Dimensions of Labs	Area in sq. ft.	Student capacity
Lab1			
Lab2			
Lab3			
Lab4			
Lab5			
		Total Area =	

Table-B

Details of Lecture Halls	Dimensions of Halls	Area in sq. ft.	Student capacity
Hall1			
Hall2			
Hall3			
Hall4			
Hall5			
		Total Area =	

Table-C

Other details	Dimensions	Area in sq. ft.
Library		
Reception Room		
Separate Office Room		
Staff Room		
Stores		
Drinking water		
First aid		
Ladies room		
Toilet		
Other		
	Total Area =	

Table-D

Grand Total of Table-A, Table-B and Table-C	_____ sq. ft.

Furniture and Fixtures: Provide details of furniture and fixtures

Table-E

Tables	Chairs	Cup-boards	Fans	Tube-lights

Staff Details: Give details of Teaching Staff (for Computer programmes) at the college (Enclose the Faculty Bio-data of each Counsellor in prescribed format given in **Appendix I** along with the true copy mark sheet of highest qualification and its certificate)

Table-F

Sr. No.	Name of counsellor (Instructor)	Faculty (Visiting / Full Time)	Educational Qualification	Total Experience in Years	Telephone Number (Residence and Mobile)	Is the true copy mark sheet of highest qualification and its certificate attached ?
1		Coordinator				Yes/No
2		1st Full Time				Yes/No
3		2nd Full Time				Yes/No
4		3rd Full Time				Yes/No
5		4th Full Time				Yes/No
6		5th Full Time				Yes/No
7		6th Full Time				Yes/No
8		1st Visiting				Yes/No

9		2nd Visiting				Yes/No
10		3rd Visiting				Yes/No
11		Lab Assistant				Yes/No

Date: Seal of the College   Name and Signature of Principal

Appendix-C

Software: Provide the details of the software available

Sr. No.	Name of Software	Version / Specification
1.	Windows	
2.	MS-Office	
3.	Page Maker	
4.	Tally	
5.	AutoCAD	
6.	Visual Basic	
7.	Skype	
8.	Flash	
9.	Photoshop	
10	Internet Explorer	
11	Anti Virus Software	
12	WinZip	
13	Acrobat pdf Reader	
14	Disk Manager	
15	IIS	

16	PWS	
17	Apache	
18	HTML/DHTML Editor	
19	ASP Editor	
20	Visual Studio 6.0	
21	Visual Studio .NET Enterprise Edition	
22	ORACLE	
23	Other Standard Software	1.
		2.
		3.
		4.
		5.
		6.

Date: Seal of the College   Name and Signature of Principal

10

Appendix-D

Student Enrolment: Provide the details of students registered at your college for various computer programmes (provide brochures and prospectus for the same).

Sr. No.	Degree/Diploma Programme	Duration	Fees	Number of students	Affiliated to which Board/University/ Other

Date: Seal of the College   Name and Signature of Principal

Appendix-E

Photographs of the Institute (Post Card Size)
(The photographs should clearly indicate the following five points. Paste three photos on one paper.)

1. Front View (Displaying Institute's Name Board)

2. Computer Laboratories

3. Library Resource Centre

4. Lecture Halls

5. Office Room with signboard

6. Other photos, if any, which will convey the facilities available at the institute.

Appendix-F

Book Bank

Books: Provide the list of books in the Book Bank in the following format.

Sr. No.	Name of the subject	No. of Copies
1.		
2.		
3.		
4.		
5.		
6.		

Magazines: Provide the details of Magazines subscribed by the Study Centre.

Sr. No.	Name of Magazine	Subscription end month	No. of Copies
1			
2			
3			

CBTs: Provide the details of CBTs (CDs/DVDs) available at the Study Centre.

Sr. No.	Name of CBT	Subject Area Covered
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

Date: Seal of the College   Name and Signature of Principal

Appendix-G

(To be submitted by the Management on Rs. 100/- Non-Judicial Bond Paper)

We
Mr. / Mrs._____
Chairman of the Organization of _____
And Mr. / Mrs. _____
Secretary of Organization of _____
Mr. / Mrs. _____
Principal/Director of the College/ Institution_____

have been given to understand about the various Computer Programs of Yashwantrao Chavan Maharashtra Open University (herein after called as YCMOU) Nashik.

We herby agree to offer the Services of our college for the establishment of Study Centre of the YCMOU Nashik for academic programmes under the School of Computer Science, YCMOU, Nashik.

01   We agree to spare the accommodation, computing facilities, equipments, tools and other infrastructure facilities for implementation of the programme as prescribed by YCMOU.

02   We agree to provide a separate and easily accessible office space for YCMOU study centre. Moreover, we agree to put up sign board bearing the Name of YCMOU Study Centre at the prominent location.

03   We agree to implement the programmes of YCMOU sincerely with due dignity, quality and maintain the high standard of educational values as prescribed by YCMOU.

04   We agree to follow procedures regarding promotion, admission, examination and other procedures specified by YCMOU.

05   We agree to ensure security and record of learning material.

06   We agree to provide willing faculty members of our college to work as designated study centre Coordinator, Counsellors, and Lab Assistant as prescribed by the YCMOU from time to time.

07   We agree to take every care to scrutinize Admission Forms of students and verify eligibility of students to various programmes.

08   We agree to collect the study centre fee from students as prescribed by YCMOU and issue the receipt of payment to the respective student. In any case we will NOT charge fees more than what YCMOU has prescribed.

09   We understand that the students' fees once paid to the university are not refundable in case of Certificate and Diploma students. Fee refund rules of YCMOU will be applicable for degree students.

10   We agree to submit student admission forms to YCMOU and collect study material from YCMOU and distribute to the students without demanding any financial compensation.

11   We further agree to make available necessary training materials, consumables, electricity and water facilities to the students undergoing various programmes of the university without demanding any financial compensation from YCMOU.

12   We hereby agree to maintain record of financial Accounts, Receipts and Expenditure as prescribed by YCMOU. We understand that the study centre share of programme fees includes expenditure towards running of study centre which includes components like salaries of staff, honorarium to counselors, honorarium given to supervisors for theory examination, examiners for practical examinations, assessors of assignments, payment towards advertisements, TA/DA for travel to attend various events organized by the university, cost of computing and other facilities at the study centre etc. Hence, we will not demand any financial compensation from YCMOU for such kind of expenditure.

13   We also agree to maintain all records in respect of the programmes and submit the same to the university authorities as and when asked for.

14   We agree to inform to the students all instructions received from the University regarding the course, contact of sessions, conduct of examination etc.

15   We agree to extend full cooperation and support for the smooth conduct of these academic programmes (including end exam) as per the approved rules of the university.

16   We agree to send our counsellors and experts for paper setting, question bank development and other activities carried by YCMOU.

17   We agree that the examination of our students may not necessarily be conducted at our study centre.

18   We agree to provide computing and other facilities for conduct of examination in case YCMOU decides to organize examination of our students or students of other study centres at our study centre.

19   We understand that the responsibility of genuineness of software being used at my institute rests on me. We will be fully responsible for any kind of complaints made by respective vendors/developers of software being used at my study centre.

20   We agree to use suitable anti-virus software to maintain computer systems virus free.

21   We agree that YCMOU shall have full power to close down my Study Centre in consistent with YCMOU rules, regulations, policies and powers without assigning any reason and without any reimbursement for loss from YCMOU to our organization.

22   We will take every measure to preserve the original receipt of Deposit paid to YCMOU. We understand that if original receipt is lost, we will not get deposit back from YCMOU. We further understand that the deposit amount will be refunded after deducting the 15% administrative charges.

23   We have read all the Rules and Regulations given by the authority of YCMOU and we hereby agree to abide by the Rules and Regulations to that effect. Failing of which my study centre shall be closed.

24   We hereby agree that any dispute with regards to the opening or closing of study centre shall be sorted out with the mutual discussion and the Director of the Concerned School/Division of YCMOU Nashik shall be the final authority to

pass an order to that respect which shall be binding on the institute running the YCMOU study centre.

25   We agree that all legal disputes regarding study centre and enrolled students shall be subject to Nashik jurisdiction only.

1) Chairman of the Organization   Name and Signature

2) Secretary of Organization   Name and Signature

3) Principal/Director of the College/ Institution   Name and Signature

Date_____
 MOU Accepted / Rejected and Signed

Director
S.S.D. / School of Computer Science
YCMOU

Date _____   Seal of YCMOU

Appendix-H

Format for Resolution of the Society/Trust

It is resolved unanimously in the meeting of the Governing body of
_____
_____held on _____
under the Chairmanship of Shri _____ that the
Study Centre of Yashwantrao Chavan Maharashtra Open University, Nashik be
established in _____
College / Institute / Foundation / Trust.

If the University permits the College/Institute/Foundation/Trust to establish the centre, we undertake to provide all the necessary academic and infrastructure facilities and cooperate for the smooth and efficient functioning of the Study Centre. We shall extend full cooperation and support for the smooth conduct of these academic programmes (including end exam and central assessment programme), as per the approved rules of the university. We shall abide by the rules and regulations of the Yashwantrao Chavan Maharashtra Open University, Nashik prescribed and revised from time to time.

If the Study Centre is closed down for any reason, equipments, furniture, books and other material, which is supplied by the University, shall be returned back to the University We shall have no objection if the University ceases the services of Counsellors, Coordinator and Office Staff appointed at the Study Centre.

Proposed by _____
Seconded by _____

(Seal of the Institution)	Signature with Date (Name:) Secretary Institution/Foundation/Trust	Signature with Date (Name:) Chairman/President Institution/Foundation/Trust

Appendix-I

<table>
<tr><td>Applying for:</td></tr>
<tr><td>1) COORDINATOR</td></tr>
<tr><td>2) COUNSELOR</td></tr>
</table>

Bio-data

YASHWANTRAO CHAVAN MAHARASHTRA OPEN UNIVERSITY, NASHIK

Note:
1) Select appropriate box by Check mark.
2) Write Phone No. with STD code & write PIN code in address.
3) Attach true copies of relevant documents (Mark sheets, Certificates, Experience letters, etc)
4) Before submitting verify the completeness of the form. Incomplete forms will not be entertained.

Affix here recent passport size photograph

(A) Personal Information

Personal Information							
Name in English (Write name in CAPITAL LETTERS)	Last Name			First Name		Middle Name	
Date of Birth							
Address (office)							
Taluka		Dist			Pin code		
Address (residence)							
Taluka		Dist			Pin code		
Phone (Office)		Phone (Residence)					
Fax Details							
Mobile No.		e-mail					
Known Language	English		Marathi			Hindi	

(B) Educational Qualification

Education	Diploma/ Degree Title	College/ University / Board Name	Main / Special Subject	% Marks	Grade & Class	Passing Year
Under Graduate Diploma						
Graduation						
Post Graduate Degree						
Post Graduate Diploma						
M. Phil.						
Ph.D.						
Other						

(C) Teaching / Professional Experience

Teaching at under Graduate level	years
Teaching at Post Graduate Level	years
Industrial/Professional Experience	years
Total Experience	years

(D) Contribution for implementing the programmes

Sr. No.	Type of Work	Programme	Course	Year/Duration	University
1	Counseling				
2	Text Book writing				
3	Text Book Editing				
4	Syllabus designing				
5	Paper setting				
6	Item writing/editing				
7	Examiner				

(E) Operating Systems Handled

Operating System	Version	Experience in years
WINDOWS		
UNIX / LINUX		
NOVEL NETWORK		

(F) Projects handled while learning and while in Job

Sr. No.	Project Title	Front end	Back end
1.			
2.			
3.			
4.			
5.			

(G) Specify Programming Languages / Subjects taught by you

Sr. No.	Subject name	Sr. No.	Subject name
1.		2.	
3.		4.	
5.		6.	
7.		8.	
9.		10.	

(H) Specify the YCMOU courses you are interested in for counseling (should not exceed 5 courses)

Sr. No.	Course Code	Name of Course	Tick Mark
1.	CMP130	Visual Basic	
2.	CMP201	Programming Expertise in "C"	
3.	CMP202	Data Structures Through C	
4.	CMP203	OOPS & C++	
5.	CMP204	Office Tools	
6.	CMP205	Software Engineering	
7.	CMP206	Principles of Database Management Systems	
8.	CMP207	Computer Fundamentals	
9.	CMP208	Business Information Systems	
10.	CMP209	Data Communication & Networking	
11.	CMP211	Visual Programming	
12.	CMP212	Building Web Portals through ASP.Net	
13.	CMP213	Programming Excellence through C#	
14.	CMP214	Expertise Solution using J2EE	
15.	CMP215	Data Structures through C++	
16.	CMP216	Distributed Computing Through COM/DCOM	
17.	CMP217	DirectX Game Programming	
18.	CMP218	Writing Windows Device Drivers	
19.	CMP220	Programming Excellence through VB.Net	
20.	CMP221	Statistical Techniques	
21.	CMP222	Computerised Financial Accounting	
22.	CMP223	Computer Organisation	
23.	CMP226	ERP	
24.	CMP227	E-Commerce	
25.	CMP230	Communication Skills & Tech Writing	
26.	CMP242	Humanities & Social Obligation	
27.	CMP247	JAVA	
28.	CMP248	Linux	
29.	CMP250	Mathematics for Computers	
30.	CMP253	New Development in Information Technology	
31.	CMP255	Operating Systems	

32.	CMP256	Oracle	
33.	CMP258	Professional Development	
34.	CMP262	Study Skills	
35.	CMP263	Systems Analysis & Design	
36.	CMP223	Computer Organisation	
37.	CMP227	E-Commerce	
38.	CMP230	Communication Skills & Tech Writing	
39.	CMP247	JAVA	
40.	CMP253	New Development in Information Technology	
41.	CMP255	Operating Systems	
42.	CMP401	Cloud Computing	
43.	CMP403	Software Testing	
44.	CMP402	Mobile Application Development	

(I) Select all those activities where you wish to contribute

Development	Counseling	Examination
Virtual Classroom Modules ❑ Academic Resource Person ❑ Academic and Technical Editor ❑ Language Editor **Textbook or Workbook** ❑ Writer ❑ Content Editor ❑ Language Editor ❑ Translator **Audio Video** ❑ Script Writer ❑ Script Editor ❑ Language Editor	❑ Online Counselor ❑ Theory Counselor ❑ Project Work Counselor	**Question Bank** ❑ Item Writer ❑ Content Editor ❑ Language Editor ❑ Evaluation Editor **Paper Setting** ❑ Theory Paper Setter **End Exam Coordination** ❑ Exam Centre Head **End Exam Conduct for Practical, or Project-Work** ❑ External Examiner **Central Assessment Programme** ❑ Moderator ❑ Examiner

I declare that above information is true to best of my knowledge. Attested photocopies of relevant documents are attached herewith.

Date: **Signature of Applicant**

Forwarded through me for further necessary favourable considerations as

COORDINATOR/COUNSELOR

Date: Seal/Stamp of   Signature of
                                    College/Institute/SC   Principal/Head/Proprietor

Approved and certified by

Director,   **Director,**   **Director**

School of Computer Science   **Evaluation Division**   **Student Services Division**

Check List of Documents

Check List of Documents (Institute should Ensure all the documents are attached to the proposal. Tick appropriate columns in the following table and attach this page as the first page of proposal)

While submission of proposal file regional center representative should ensure the file is complete. In case of incomplete file ask applying institution to complete it and then resubmit.

Sr. No.	Essential / Additional Documents	To be filled by the College Is document attached?		To be filled by regional center representative Is document attached?	
		YES	NO	YES	NO
1.	CD containing the scanned documents				
2.	Appendix A				
3.	Appendix B				
4.	Appendix C				
5.	Appendix D				
6.	Appendix E				
7.	List of Books, Magazines and CBTs as specified in Appendix F				
8.	Memorandum of Understanding (MOU) Appendix-G				
9.	Resolution of the Society or Trust of parent organization as specified in Appendix H / provide true copy of shop act license				
10.	Bio-data of the proposed Coordinator with necessary true copies of mark sheets, certificate as specified in Appendix I				
11.	Bio-data of each Counsellor in prescribed format along with the true copies of the mark sheets and certificates as specified in Appendix I				
12.	True copies of the accepting letters from the visiting faculties.				
13.	True copies of the letters of Accreditation and Membership of other organization				
14.	True copies of the letters of Affiliation / Partnerships / Dealership				
15.	True copies of layout of the institute/building with dimensions				
16.	True copies of Ownership / lease / rent documents				

Date:

Signature of the verifying person
Name of the verifying person: _____