

F. No./NRC/NCTE/UP-3261/301st Meeting/2019/20123

Dated: 20 JUN 2019

SHOW CAUSE NOTICE U/S 17 of the NCTE Act, 1993

WHEREAS, recognition was granted by the Northern Regional Committee to **L. N. College, Labhaua Road, Shikohabad, District – Firozabad, State – Uttar Pradesh** vide Order No. NRC/NCTE/F-7/UP-3261/147th Meeting/2009/8515 dated 20.08.2009 with an annual intake of 100 seats from the academic session 2009-10 and Revised Recognition order was issued to the institution for two years **B.Ed.** course No. NRC/NCTE/UP-3261/2015/114627-32 dated 06.06.2015 with an annual intake of 100 seats (2 Units of 50 students each) from the academic session 2015-16.

2. AND WHEREAS, on consideration of the conditions mentioned in Section 17 (1) of the NCTE Act, 1993 meriting withdrawal of recognition, the matter was placed before NRC in its 301st Meeting held on 09th to 11th May, 2019 in light of पत्रांक:-सम्ब0/8214/2019 दिनांक 15.02.2019 received from Dr. B. R. A. University, Agra against the 134 institutions including the above institution alongwith the letter No. पत्रांक:-सम्ब0/8050/2019 दिनांक 19.01.2019 written by the university to the institution and the Committee, decided to issue Show Cause Notice under Section 17 of the NCTE Act, 1993 giving specified time for submission of reply / documents on the following grounds:-

- Dr. B. R. A. University, Agra, stated in their letter No. पत्रांक:-सम्ब0/8050/2019 दिनांक 19.01.2019 that एन0सी0टी0ई0 द्वारा बी0एड0 पाठ्यक्रम संचालन हेतु विनियमन 2014 लागू किया गया है उक्त विनियमन के प्रावधान के अनुसार आपके महाविद्यालय में बी0एड0 पाठ्यक्रम में छात्रों के पठन पाठन हेतु एक यूनिट (50 छात्र) पर 08+03 (विशिष्ट विषय शिक्षक –फाईन आर्ट, संगीत एवं शारीरिक शिक्षा) 11 तथा दो यूनिट (100 छात्र) पर 16 शिक्षकों का अनुमोदन विश्वविद्यालय से प्राप्त करना चाहिये था, किन्तु विनियमन लागू होने के 04 वर्ष बाद भी आपके महाविद्यालय द्वारा न तो कोर-फैकल्टी और नही विशिष्ट विषयों यथा 7 फाईन आर्ट, संगीत, शारीरिक शिक्षा हेतु शिक्षक अनुमोदित कराये गये है जो कि विनियमन 2014 के अनुसार नियम विरुद्ध है साथ ही माननीय कुलपति जी के दिनांक 16.11.2017 के आदेशानुसार महाविद्यालय में पूर्व से कार्यरत शिक्षकों का अनुमोदन 05 वर्ष पूर्ण होने पर शासनादेश संख्या 2218/सत्तर-2-2011-16(409)/2010 दिनांक 23.08.2011 के अनुपालन में विश्वविद्यालय से पुनः अनुमोदन निरस्त कर दिया गया है। इस संबंध में सभी महाविद्यालयों की लॉगिन पर विश्वविद्यालय के पत्रांक संख्या संब/4213/2017 दिनांक 17.11.2017 के द्वारा सूचना अपलोड की गयी थी तथा विश्वविद्यालय द्वारा पुनः एक पत्र संख्या संब/4361/2017 दिनांक 15.12.2017 के द्वारा भी आपके महाविद्यालय में संचालित स्थायी बी0एड0 पाठ्यक्रम से संबंधित विभिन्न वॉछित सूचनायें उपलब्ध कराने हेतु महाविद्यालय की लॉगिन पर सूचना अपलोड करायी गयी थी। परन्तु आपके द्वारा उपरोक्त पत्रों के सापेक्ष में किसी तरह की सूचना आजतक उपलब्ध नहीं करायी गयी, जो कि संबद्धता शर्तों का उल्लंघन है। ऐसा प्रतीत होता है कि महाविद्यालय प्रबंधन/प्रशासन उपरोक्त पाठ्यक्रम को संचालित करने में रुचि नहीं ले रहा है।

AND WHEREAS, in light of above letter of university and decision of NRC, the institution is directed to submit the letter issued by affiliating university to the institution to approve the faculty for above course with the detail of their qualification etc. in the proforma attached with this letter. The institute is also directed to submit the details of salary disbursed to the faculty alongwith 6 Months Bank statement.

4. NOW, THEREFORE, the institution is required to submit the representation/compliance accompanied with an affidavit from the authorized representative of the Principal/Management. The representation along with an affidavit must reach this office within the time specified at the end.

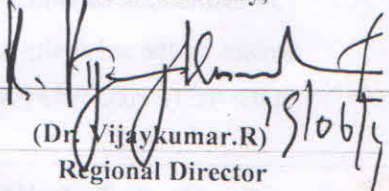
5. In case the reply submitted is incomplete or factually incorrect or not received in this office by the date mentioned in the Sr. No. 8 of this letter, then it shall be treated as incomplete reply to this notice.

6. It is expected that your reply shall reach this office through Courier / Registered AD/ Speed Post only. NCTE does not expect applicants to personally visit the RC Office for any reason whatsoever

7. Your reply, complete in all respects must reach this office on or before 19/07/2019.

8. Receipt of this Notice may please be acknowledged.

Your faithfully,


(Dr. Vijaykumar.R)
Regional Director

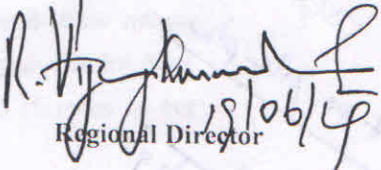
To,

The Principal,
L. N. College,
Labhaua Road, Shikohabad,
District – Firozabad, State – Uttar Pradesh.

✓ Copy to: -

The Manager/Secretary,
Laxmi Narayan Educational Jan Kalyan Trust,
Town – Shikohabad, Post Office – Shikohabad,
Tehsil/Faluka – Shikohabad, Town City – Shikohabad,
District – Firozabad, State – Uttar Pradesh.

डॉ. विजयकुमार. आर
Dr. VIJAYKUMAR. R
क्षेत्रीय निदेशक/Regional Director
उत्तर क्षेत्रीय समिति/Northern Regional Committee
राष्ट्रीय अध्यापक शिक्षा परिषद्
National Council for Teacher Education
भारत सरकार /Govt. of India
जी-7, सेक्टर-10, द्वारका, नई दिल्ली-110075
G-7, Sector-10, Dwarka, New Delhi-110075


Regional Director

Encl.: - 1. Proforma of Teaching Staff.

2. Copy of above referred Letter received from Dr. B. R. A. University, Agra, UP.

ANNEXURE - F

FORMAT OF AFFIDAVIT ON RS.100/- STAMP PAPER TO BE SUBMITTED

ALONG WITH THE REPLY TO SHOW CAUSE NOTICE

I _____ son/daughter/wife of Shri _____, the _____
(Chairman/President/Secretary (in case of Self Financed Pvt. Institution) _____ (Name of the Society/Trust/Name of the Govt. Body with complete address, pin code, phone No., Mobile No., E.Mail ID, etc.) or Head of Office/Registrar/Principal (in case of Govt. institution) of the _____ (Name of the Govt. Body with complete address, pin code, phone No., Mobile No., E.Mail ID, etc.), do hereby solemnly affirm and declare that I am authorised to make this affidavit on the _____ day of _____, 2019. That I am well conversant with all the facts and details, pertaining to _____ (name of the institution) :-

(i) That our society had submitted an application for grant of recognition / permission to _____ Regional Committee, NCTE for _____ course vide application No. _____ / That our institution is recognised by _____ RC for _____ course vide No. _____ dated _____
(Strike out whichever is not applicable)

(ii) That the _____ Regional Committee had issued Show Cause Notice to our institution vide No. _____ dated _____.

(iii) That in response to the above Show Cause Notice, our institution is submitting the following submission.

- a. _____
- b. _____
- c. _____
- d. _____

DEPONENT

Verification

I _____ above named deponent do hereby verify that the information provided under para No. 1 to _____ including sub-paras wherever given are true and correct to the best of my knowledge and belief. Nothing is false or incorrect and nothing is concealed.

I do understand that in the event of any information provided as above if found incorrect the recognition of teacher education programme being run in my Institution/College/Department will be withdrawn and I will be prosecuted under relevant provision of IPC etc. against such misreporting/providing wrong information.

DEPONENT

Date

Place



एन सी ई आर टी ई
NCERT

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O. I. G. S

Speed Post / Registered Post / Courier

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PL.0
110075

If undelivered, please return to :

Northern Regional Committee

National Council for Teacher Education

(A Statutory Body of the Government of India)

G-7, Sector-10, (Near Sector-10 Metro Station) Dwarka,
New Delhi-110075

Ph.: 011-20892151, 011-20892152

E-mail : nrc@ncte-india.org, Website : www.ncte-india.org



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