

**Standard Operating Procedures (SOPs) for processing of applications by the
Regional Committees**

The following category of the applications received by the Regional Committees must be rejected summarily immediately after its receipt **without issuing any Show Cause Notice to the institution**, as envisaged in the Clause 7(2) of the NCTE Regulations, 2014: -

- a) failure to furnish the application fee, as prescribed under rule 9 of the National Council for Teacher Education Rules, 1997 on or before the date of submission of online application;
- b) failure to submit print out of the applications made online, alongwith the land documents as required under sub-regulation (4) of Regulation 5 within fifteen days of the submission of the online application.

The processing of the application, not covered under clause 7 (2) must be made in the following manner:-

Sl. No.	Particulars	Timeline
1.	Submission of application for recognition in terms of Regulation 5	1 st March to 31 st May of the year immediately preceding the relevant academic year.
2.	Communication of deficiency, shortcomings or any other discrepancy in the application submitted by the applicant in terms of Regulation 7.1 by way of Show Cause Notice. (Other than deficiencies mentioned in 7(2) above)	Within 45 days from the date of receipt of the application
3.	Removal of such deficiencies by the applicant	Within 30 days from the date of receipt of communication from RC concerned.

Sl. No.	Particulars	Timeline
Letter/Reminders to the State Govt./UT Admin.		
4.	In case applications not covered under Regulations 7.1 and 7.2 , forwarding of copy of the application to the State Government/ U.T. Administration for its recommendations / comments in terms of Regulation 7.4 .	Within 30 days from the date of receipt of application, with request to the State Government/U.T. Administration to provide its recommendations/ comments to the Regional Committee within 45 days.
	<p><u>Reminder-1</u></p> <p>If recommendations/comments are not received within 45 days, the Regional Committee shall send a reminder letter to the State Government / U.T. Administration for submission of the recommendation/comments in terms of Regulation 7.6.</p>	Within 7 days from the date of expiry of the period of 45 days, with request to the State Government/U.T. Administration to provide its recommendations/comments to the Regional Committee within 30 days from this communication from RC.
	<p><u>Reminder-2</u></p> <p>If recommendations/comments are not received within 30 days, the Regional Committee shall send second reminder letter to the State Government/ U.T. Administration for submission of the recommendation/comments in terms of Regulation 7.6.</p>	Within 7 days from the date of expiry of the period of 30 days, with request to the State Government/U.T. Administration to provide its recommendations/comments to the Regional Committee within 15 days from the issue of such second reminder.
5.	Conducting of inspection by the Regional Committee of the applicant institution under Regulation 7.7 .	Maximum 90 days from the date of receipt of application or receipt of recommendations/ comments from the State Government/U.T. Administration whichever is earlier, if the application is complete otherwise.

Sl. No.	Particulars	Timeline
		<p>Note 1 :- In case no deficiency is found in the application and the recommendation/ comments of the State Government/U.T. Administration is received within 45 days then Regional Committee shall conduct the inspection of the institution within 45 days.</p>
6.	Inspection of the institution.	As prescribed in VT Module/Software.
7.	Submission of VTR by the Visiting Team.	<p>The VTR is to be uploaded latest by the next day of actual inspection by VT Members and its hard copy is to be despatched on the same day of uploading or maximum the next day. Instances of delays in uploading of VT Report be brought to the notice of NCTE-HQrs.</p>
8.	Consideration of the VTR by the Regional Committee and thereupon decision of issue of LOI or otherwise to the institution.	<p>Within 7 days from the receipt of VTR or in the next meeting of Regional Committee immediately thereafter, whichever is earlier.</p> <p>[Note:- Names of VT members whose reports are faulty or deliberately misleading should be informed to the NCTE –(HQ)]</p>
9.	Time for compliance of conditions specified in LOI.	Within 60 days from the date of issue of LOI.

Sl. No.	Particulars	Timeline
10.	Placing the reply of LOI submitted by the institution before the RC for Decision of Regional Committee.	Within 7 days from the receipt of reply of LOI or in the next meeting of Regional Committee immediately thereafter, whichever is earlier.

Apart from the above, the following is to be noted by the Regional Committee/Regional Office for strict compliance:-

- a) The Regional Office may maintain a hard copy of each Regulatory file but the processing of the file shall be done invariably through e-office.
- b) At any stage of processing if the institution is found deficient in terms of NCTE Regulations, the Regional Committee shall provide only a single opportunity for written representation uniformly through issue of Show Cause Notice (SCN). It needs to be stressed that the following should be the protocol in this regard: -
 - i. Deficiencies need to be worked out on one-time basis and intimated to the institution through a single comprehensive notice.
 - ii. In case of incomplete or unsatisfactory reply to SCN, no further opportunity needs to be given and the case should be put up to RC for rejection – *(template Show Cause Notice attached)*
 - iii. Multiple SCNs in any one case will invite disciplinary proceedings against concerned staff.
 - iv. In case proceedings under **Section 17** are contemplated then there should be two opportunities in case the first SCN has not elicited any response or a partial response. Again the second SCN should be the final communication in all respects.
- c) The Action Taken on the Minutes of the previous meeting shall be completed by the Regional Office within seven days of signing of the minutes and the same shall be placed before the Regional Committee for its information in the next meeting, while confirming the minutes. For this purpose, in the ATR there should be a column indicating status of compliance against each minuted item.

- d) The monthly MRM Report submitted by the Regional office shall be placed before the Regional Committee for its perusal, information and appropriate action.
- e) The Regional Committee on its own shall not review / reopen any of its decision after confirmation of the minutes.
- f) All the applications are to be processed also keeping in view the Citizen Charter circulated by NCTE.
- g) It shall be the duty of the Regional Director to not only be present while the RC meeting is being conducted but also ensure that no factual inaccuracy comes in the decisions recorded in the minutes.
- h) Notice for the date and time of the meeting will be circulated to all the members 15 days before the scheduled date of the meeting.
- i) The gist of the decisions taken during the meeting will be recorded on the same day/ last day of the meeting and signed by all the members present.
- j) The Minutes of the meeting will be drawn on the basis of the gist of the decisions taken during the meeting and be duly signed by the Chairperson and Convenor of the Regional Committee on each page and be circulated invariably by the next day of the meeting.
- k) RDs must clearly submit all facts and recommend course of action to RCs as envisaged under Clause 7 (12) of NCTE Regulations, 2014. Vague or noncommittal notings shall be viewed seriously – (*Templates of Checklist Agenda Note attached*).
- l) Regarding cases remanded back by Appellate Authority or Courts, as the case may be, the Regional Director shall ensure that such matters shall be placed before the Regional Committee, with appropriate recommendations, in any meeting within 7 days of receipt of such orders or ensuing meeting, whichever is earlier.
- m) After issue of LOI [7 (13) of NCTE Regulations], any SCN may be issued only on non-compliance of terms of Regulation 7(13), and not for any other reason. In case any deficiency is discovered at this stage, which should have been pointed out earlier, then a reference must be made to NCTE-HQrs with name of erring official.

- n) The basic unit of the TEPs shall comprise of fifty students in each programme. The institution may be permitted to opt for two or more unit/s, as the case may be, in case the institution is eligible for more than one unit.
- o) All meetings of the Regional Committees shall be invariably videographed and the Video CD shall be carefully maintained by the Regional Directors concerned for inspection by NCTE-Hqrs.

Note:

- 1) Any deviation from the Standard Operating Procedures (SOPs) mentioned above will invite disciplinary proceedings against the RD.
- 2) These SOPs should be circulated to all staff dealing with regulatory matters. A copy should invariably be kept under the table glass of each such official/officer.

The following formats are attached herewith:-

Sl. No.	Annexure No.	Particular
1.	Annexure – A	Show cause notice prior to Inspection
2.	Annexure – B	Show Cause Notice after Inspection
3.	Annexure – C	Show Cause Notice after issue of Letter of Intent
4.	Annexure – D	First Show Cause Notice u/s 17 of the NCTE Act
5.	Annexure – E	Second Show Cause Notice u/s 17 of the NCTE Act
6.	Annexure - F	Format of Affidavit to be submitted by the institutions alongwith the reply of SCN.
7.	Annexure – G	Check list for initial scrutiny of application
8.	Annexure – H	Check list for scrutiny of application after receipt of Visiting Team Report
9.	Annexure – I	Check list for scrutiny of application after receipt of Letter of Intent
10.	Annexure - J	Format of Agenda Note to be placed before the Regional Committee
11.	Annexure – K	Format of Affidavit from all the individual staff
12.	Annexure – L	Format of Affidavit from the Management regarding staff appointed by the institution.

ANNEXURE - A

SHOW CAUSE NOTICE PRIOR TO INSPECTION

F.No.

Dated:

SHOW CAUSE NOTICE

WHEREAS, in terms of Section 14/15 (***Strike out whichever is not applicable***) of the NCTE Act, 1993, _____(**Society name**) _____had submitted an application to the _____ Regional Committee of NCTE on _____ (**Date of online submission**) for grant of recognition/ permission to (**institution name & address**) for _____ course / for additional intake in the existing _____ course (***strike out whichever is not applicable***) of _____ years duration vide application No. _____.

2. AND WHEREAS, the matter was placed before _____RC in its _____ meeting held on _____ and the Committee, decided to issue Show Cause Notice under section 14/15 (3)(b) of the NCTE Act, 1993 giving specified time for submission of reply on the following grounds:-

- a. Copy of the NOC of the Affiliating Body is not submitted.
- b. Copies of Affiliation Order of the affiliating bodies for multi-disciplinary course(s) is not submitted.
- c. Copy of Registration Certificate of the Trust/Society / Company is not submitted.
- d. Bye-laws of the Society/Trust/ Company showing objectives in the Bye-laws of the Trust/Society allowing to run the Teacher Education/Physical Education courses is not submitted.
- e. Certificate from the relevant department of the government certifying that the society is not for Profit/Charitable Trust/Society/ Company is not submitted.
- f. Minority Status Certificate (MSC) issued by competent authority, (In case the Institution is a Minority Institution) is not submitted.
- g. An affidavit in prescribed format on Non- Judicial Stamp Paper of Rs.100/-,

attested by Notary Public/ Oath Commissioner is not submitted.

- h. A copy of the legally valid land document as per provisions of the NCTE Regulation, 2014, as amended from time to time, is not submitted.
- i. A copy of permission for land use or Land Use Certificate issued by the competent authority is not submitted.
- j. A copy of Mutation Certificate issued by the competent authority is not submitted.
- k. A copy of Non encumbrance certificate issued by the competent authority is not submitted.
- l. A copy of the approved building plan duly approved by the Competent Authority is not submitted.
- m. Site plan showing the location of the building as per the land & revenue records of the concerned authority is not submitted.
- n. Building safety certificate issued by the competent authority, compliant with National Disaster Management Authority guidelines is not submitted.
- o. Fire safety certificate issued by the competent authority is not submitted.
- p. A certificate to the effect that the campus, furniture and facilities in the institution are disabled friendly , not submitted.
- q. Building Completion Certificate issued by the Competent Authority, if the building of the institution is completed at the time of submission of application is not submitted.
- r. Any other reason/s (please specify)

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

4. In case the reply submitted is incomplete or factually incorrect or not received in this office by the date mentioned at the end of this letter, then your application is liable to be rejected without any further opportunity.

5. 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.

6. Your reply, complete in all respects must reach this office on or before _____ **(specify date)**

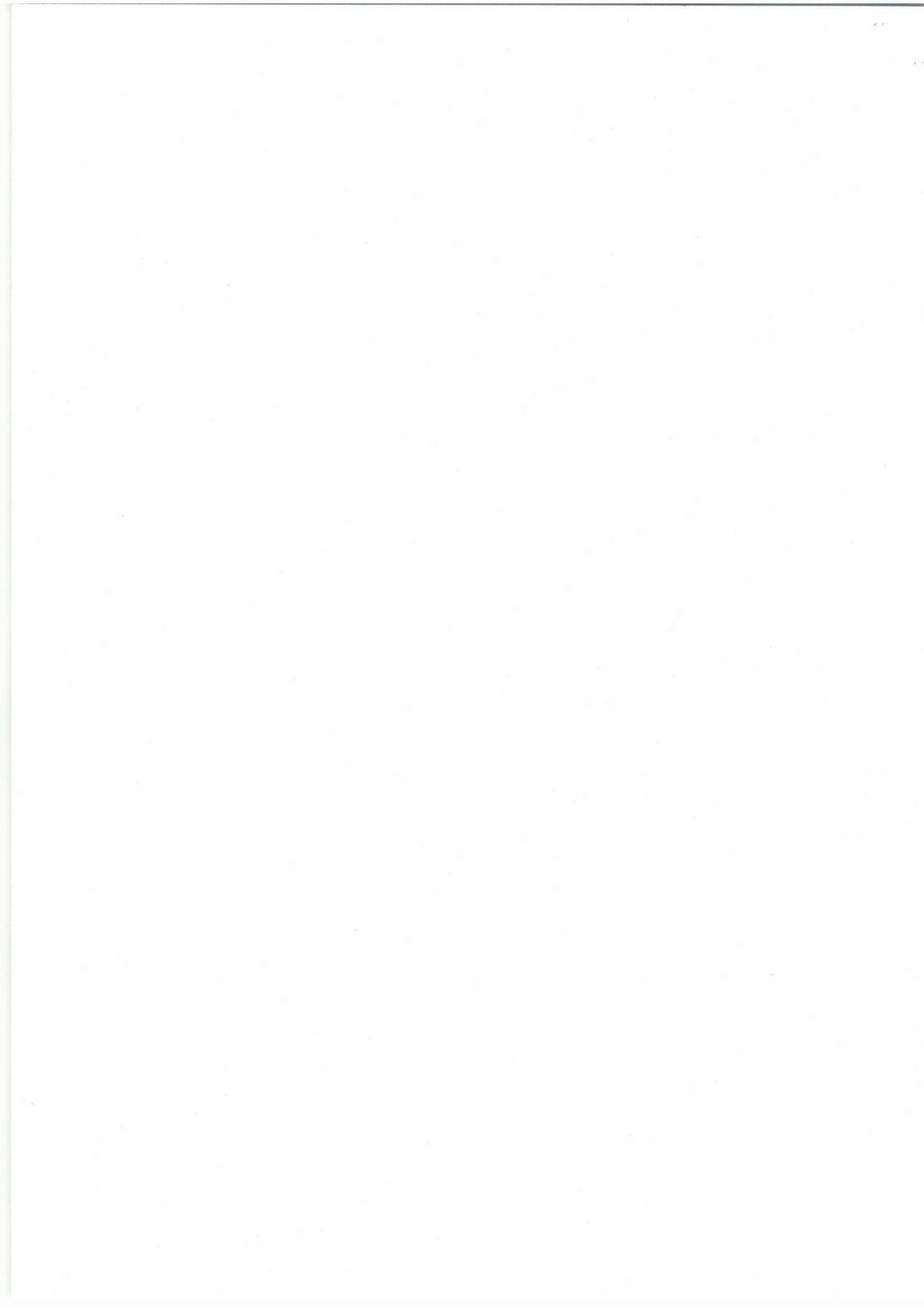
7. Receipt of this Notice may please be acknowledged.

Regional Director

To,

The

The Manager/Secretary,



ANNEXURE - B

SHOW CAUSE NOTICE AFTER INSPECTION

F.No.

Dated:

SHOW CAUSE NOTICE

WHEREAS, in terms of Section 14/15 (*Strike out whichever is not applicable*) of the NCTE Act, 1993, _____ (**Society name**) _____ had submitted an application to the _____ Regional Committee of NCTE on _____ (**Date of online submission**) for grant of recognition/ permission to (**institution name & address**) for _____ course / for additional intake in the existing _____ course (*strike out whichever is not applicable*) of _____ years duration vide application No. _____.

2. WHEREAS, an inspection team was constituted by the _____ RC, comprising of 1. _____ 2 _____. This team visited the institution on _____ to verify the infrastructural and instructional facilities available thereon.

3. AND WHEREAS, the said inspection team report was considered by the _____ RC in its _____ meeting, which on careful perusal of the Visiting Team Report, Video CD, original file of the institution, NCTE Act, Rules, Regulations and guidelines issued by NCTE-HQrs, decided to issue Show Cause Notice to the institution on the following grounds :-

- a. Building Completion Certificate in the prescribed format issued by the Competent Authority not submitted
- b. The total built up area in the institution is _____ sqm, which is less than the required _____ sqm for the proposed _____ course and the existing _____ Course (s).
- c. The building of the institution is being shared for running school / courses other than teacher education, which is not permissible as per NCTE

Regulations.

- d. Original documents with regard to Land, Building, Lab Equipments, Library were not shown to the VT Members.
- e. The size of Multipurpose hall is less than 2000 sq.ft
- f. The books and journals in the library are ____and ____, which are less than required in NCTE Regulations.
- g. The Plot / Khasra No mentioned in the Building plan and other documents does not match with the Building Completion Certificate.
- h. As evident from the VTR / Video CD, the building of the institution is under construction.
- i. As evident from the VTR / Video CD, the roofing of the building is temporary / asbestos.
- j. The accession register for library not shown to the VT Members
- k. Stock Register for all the equipments, furniture etc not shown to the VT Members
- l. If the application is for additional course / additional intake :-
 - The staff for the existing TE Course (s) was not available at the time of inspection for interaction with the VT Team.
 - The original FDRs towards Endowment and Reserve fund for the existing TE Courses were not shown to the VT Members.
 - Duly approved staff list for the existing TE course not shown to the VT Members.
- m. Any other reason/s (please specify)

4. NOW, THEREFORE, the institution is required to submit the representation/compliance accompanied with an affidavit from the authorized representative of the 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 at the end of this letter, then your application is liable to be rejected without any further opportunity.

6. It is expected that your reply will 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 _____ **(specify date)**

8. Receipt of this Notice may please be acknowledged.

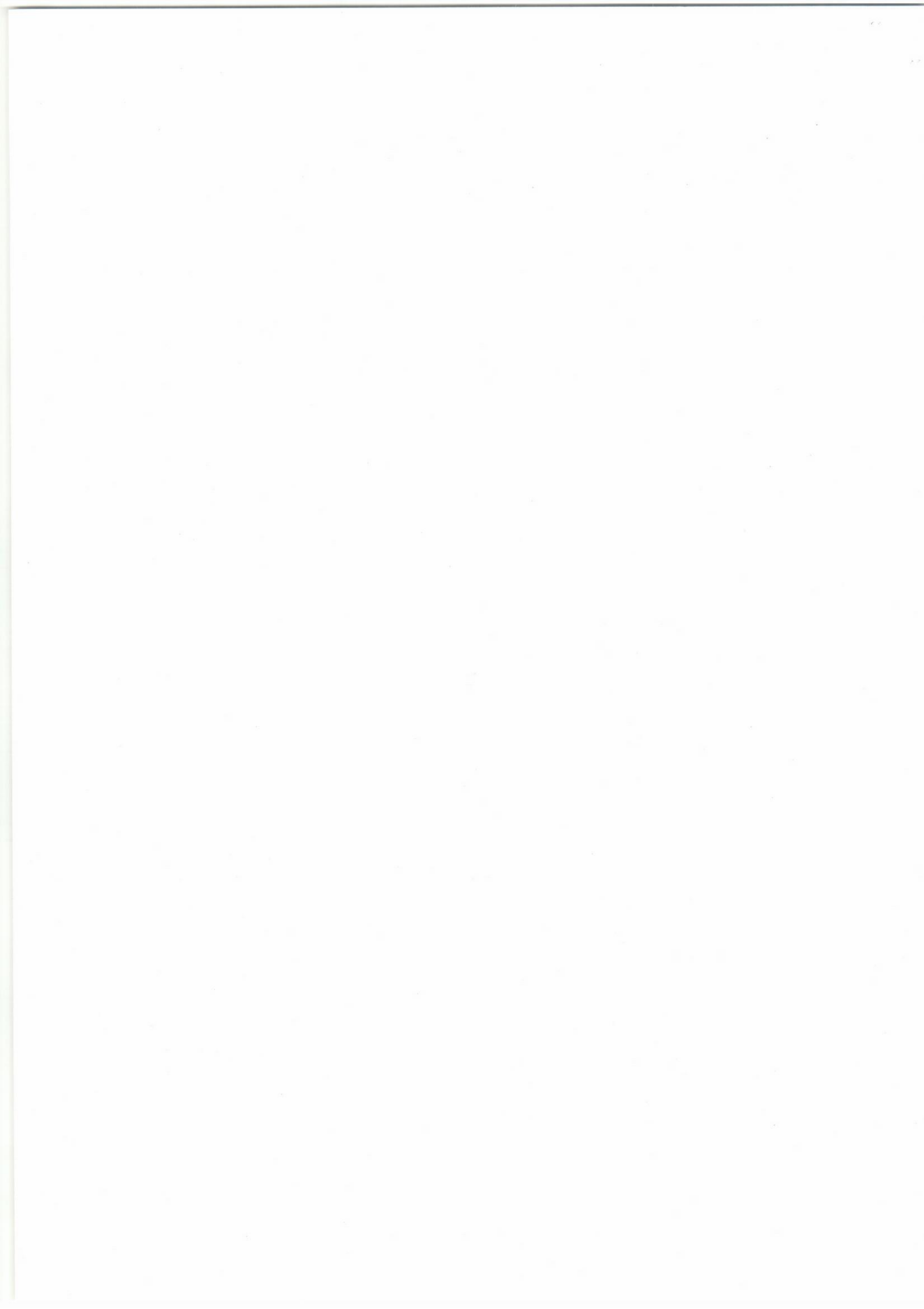
Regional Director

To,

The

The Manager/Secretary,

Society name and address



ANNEXURE - C

SHOW CAUSE NOTICE AFTER REPLY TO LOI

F.No.

Dated:

SHOW CAUSE NOTICE

WHEREAS, in terms of Section 14/15 (***Strike out whichever is not applicable***) of the NCTE Act, 1993, _____ (***Society name***) _____ had submitted an application to the _____ Regional Committee of NCTE on _____ (***Date of online submission***) for grant of recognition/ permission to (***institution name & address***) for _____ course / for additional intake in the existing _____ course (***strike out whichever is not applicable***) of _____ years duration vide application No. _____.

2. AND WHEREAS, the institution submitted a reply to Letter of Intent vide its letter dated _____, which was considered by the _____ RC in its _____ meeting, which on careful perusal of the reply submitted by the institution, original file of the institution, NCTE Act, Rules, Regulations and guidelines issued by NCTE-HQrs, decided to issue Show Cause Notice to the institution on the following grounds:-

- a. Screen shot of Website of the institution is not submitted.
- b. Staff list approved by the affiliating body not submitted / Approval of all the staff by the affiliating body not attached.
- c. All / Some of the staff are not qualified as per NCTE Norms (*Name of the staff not qualified to be clearly specified*)
- d. Photocopy of the qualification certificates of all / some of the staff not submitted (*to be clearly specified*).
- e. Affidavit from all / some of the individual staff not submitted (*to be clearly specified*)
- f. Affidavit from the Management on Rs. 100/- Stamp paper regarding staff not submitted.
- g. Fixed Deposit Receipt for Rs. 7.00 lacs and 5.00 lacs in joint account towards Endowment and Reserve Fund not submitted.

h. Any other reason/s (please specify)

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

4. In case the reply submitted is incomplete or factually incorrect or not received in this office by the date mentioned at the end of this letter, then your application is liable to be rejected without any further opportunity.

5. 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.

6. Your reply, complete in all respects must reach this office on or before _____ (specify date)

7. Receipt of this Notice may please be acknowledged.

Regional Director

To,

The

The Manager/Secretary,

Society name and address

F.No.

Dated:

FIRST SHOW CAUSE NOTICE U/S 17

WHEREAS, recognition was granted by the Northern Regional Committee to **(Institution name & address)** vide Order No. _____ dated _____ for _____ Course of _____ years duration with an annual intake of _____ units(s) of _____ students.

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 _____ RC in its _____ meeting held on _____ 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:-

- a. Any deficiency in infrastructure (*RC to specify*)
- b. Any deficiency in number of academic and non academic staff (*RC to specify*)
- c. Any deficiency in qualification of academic and non academic staff (*RC to specify*)
- d. Violation of any of the following conditions of recognition mentioned in the recognition order :- (*RC to specify*)
 - i. Non compliance with various other norms and standards prescribed in the NCTE Regulations, 2014 as amended from time to time.
 - ii. The failure on the part of the institution in admitting the students before obtaining affiliation from the examining body in terms of Clause 8(10) of the NCTE (Recognition Norms & Procedure) Regulations, 2014.

- iii. The institution did not comply with conditions laid down in clause 8(3) of the NCTE Regulations, 2014.
- iv. The institution has failed to ensure that the required number of academic staff for conducting the course is always in position.
- v. The institution has failed to adhere to the norms for teaching staff in respect of their qualifications and experience as per provisions of NCTE Regulations, 2014, as amended from time to time.
- vi. The failure of the institution with respect to fulfilment of all such other requirements as may be prescribed by other regulatory bodies like UGC, affiliating University/ Body, State Government etc.
- vii. The failure of the institution to submit a Self-Appraisal Report / Performance Appraisal Report (PAR) in the format and manner prescribed.
- viii. The failure on the part of the institution to maintain & update its Web-site as per provisions of NCTE Regulations and to always display as mandatory disclosure the following: -

- Copy of Application Form
- Land and Building Particulars
- Staff Profile
- Recognition Order
- Information regarding fulfillment of norms & standards and other conditions for the course.

- ix. The failure on the part of the institution to follow Uniform Accounting System as brought out by ICAI and accepted by the MHRD.

- e. Violation of any of the provisions of Clause 8 [8(3), 8 (11), 8 (12), 8 (14) etc.] of NCTE Regulations 2014 (*RC to specify*)
- f. Any other reason/s (*RC to specify*)

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

4. In case the reply submitted is incomplete or factually incorrect or not received in this office by the date mentioned at the end of this letter, then it shall be treated as incomplete reply to the terms of this notice.

5. 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.

6. Your reply, complete in all respects must reach this office on or before _____ (specify date)

7. Receipt of this Notice may please be acknowledged.

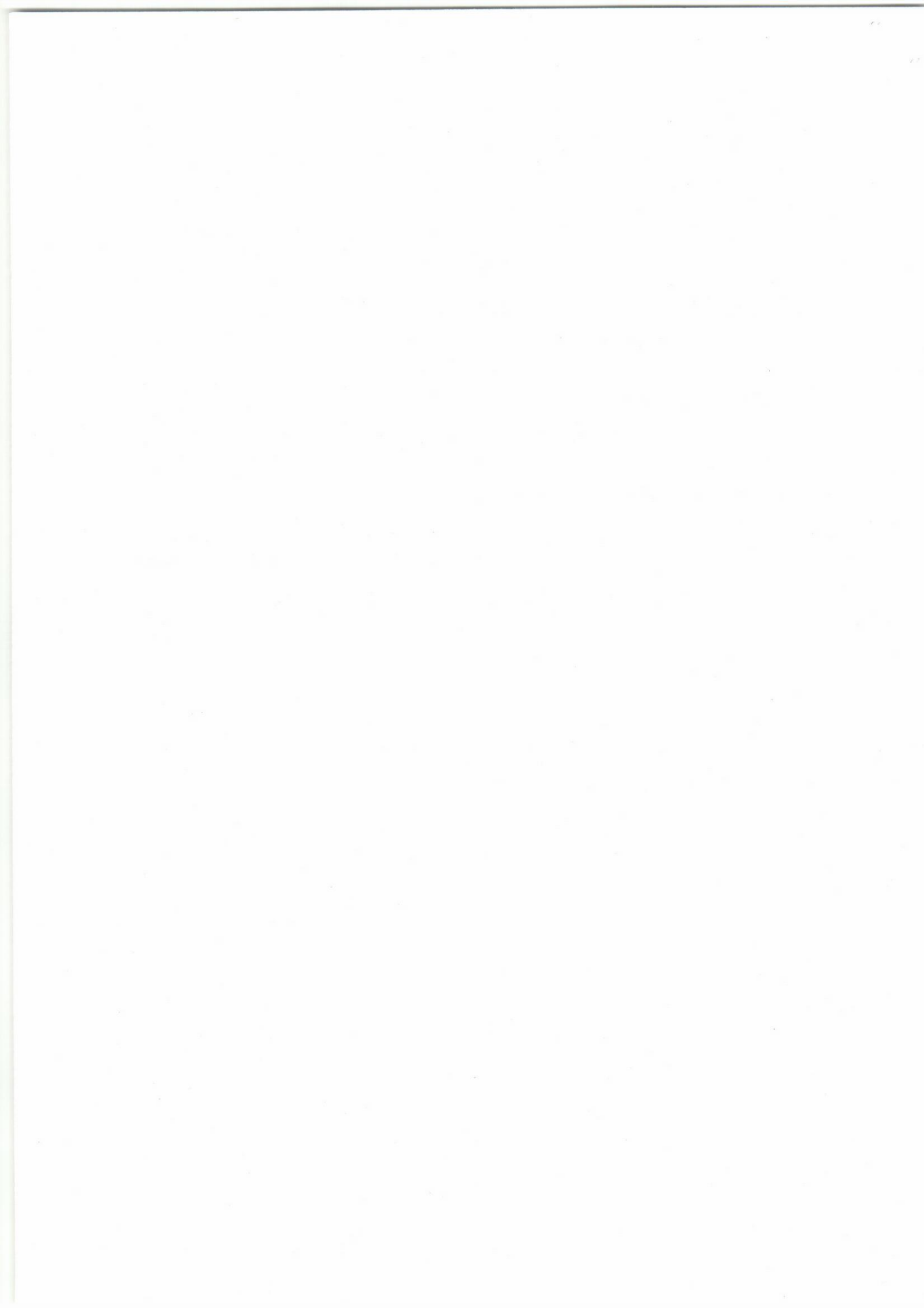
Regional Director

To,

The Principal _____

Name and Address of the institution .

Copy to : The Manager / Secretary of the Society



ANNEXURE - E

F.No.

Dated:

SECOND SHOW CAUSE NOTICE U/S 17

WHEREAS, recognition was granted by the Northern Regional Committee to **(Institution name & address)** vide Order No. _____ dated _____ for _____ Course of _____ years duration with an annual intake of _____ units(s) of _____ students.

2. **AND WHEREAS**, as per the decision of the _____ Regional Committee in its _____ meeting, a Show Cause Notice u/s 17 was issued on the institution on following grounds with a direction to submit the reply to this second Show Cause Notice on or before _____. No or partial reply was received in response to first show cause notice. The following points must be responded :-

- a. Any deficiency in infrastructure (*RC to specify*)
- b. Any deficiency in number of academic and non academic staff (*RC to specify*)
- c. Any deficiency in qualification of academic and non academic staff (*RC to specify*)
- d. Violation of any of the following conditions of recognition mentioned in the recognition order :- (*RC to specify*)
 - i. Non compliance with various other norms and standards prescribed in the NCTE Regulations, 2014 as amended from time to time.
 - ii. The failure on the part of the institution in admitting the students before obtaining affiliation from the examining body in terms of Clause 8(10) of the NCTE (Recognition Norms & Procedure) Regulations, 2014.

- iii. The institution did not comply with conditions laid down in clause 8(3) of the NCTE Regulations, 2014.
 - iv. The institution has failed to ensure that the required number of academic staff for conducting the course is always in position.
 - v. The institution has failed to adhere to the norms for teaching staff in respect of their qualifications and experience as per provisions of NCTE Regulations, 2014, as amended from time to time.
 - vi. The failure of the institution with respect to fulfilment of all such other requirements as may be prescribed by other regulatory bodies like UGC, affiliating University/ Body, State Government etc.
 - vii. The failure of the institution to submit a Self-Appraisal Report / Performance Appraisal Report (PAR) in the format and manner prescribed.
 - viii. The failure on the part of the institution to maintain & update its Web-site as per provisions of NCTE Regulations and to always display as mandatory disclosure the following: -
 - Copy of Application Form
 - Land and Building Particulars
 - Staff Profile
 - Recognition Order
 - Information regarding fulfillment of norms & standards and other conditions for the course.
 - ix. The failure on the part of the institution to follow Uniform Accounting System as brought out by ICAI and accepted by the MHRD.
- e. Violation of any of the provisions of Clause 8 [8(3), 8 (11), 8 (12), 8 (14) etc.] of NCTE Regulations 2014 (*RC to specify*)
- f. Any other reason/s (*RC to specify*)

3. Accordingly, the ___ Regional Committee decided that a Final Show Cause Notice u/s 17 of the NCTE Act be issued to the institution to submit its representation / reply to the observations noted by the Regional Committee.

4. NOW, THEREFORE, the institution is required to submit the representation/compliance accompanied with an affidavit from the authorized representative of the 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 at the end of this letter, then proceedings under Section 17 (1) of the NCTE Act shall be brought to logical conclusion without any further opportunity provided in the matter whatsoever.

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 _____ (specify date)

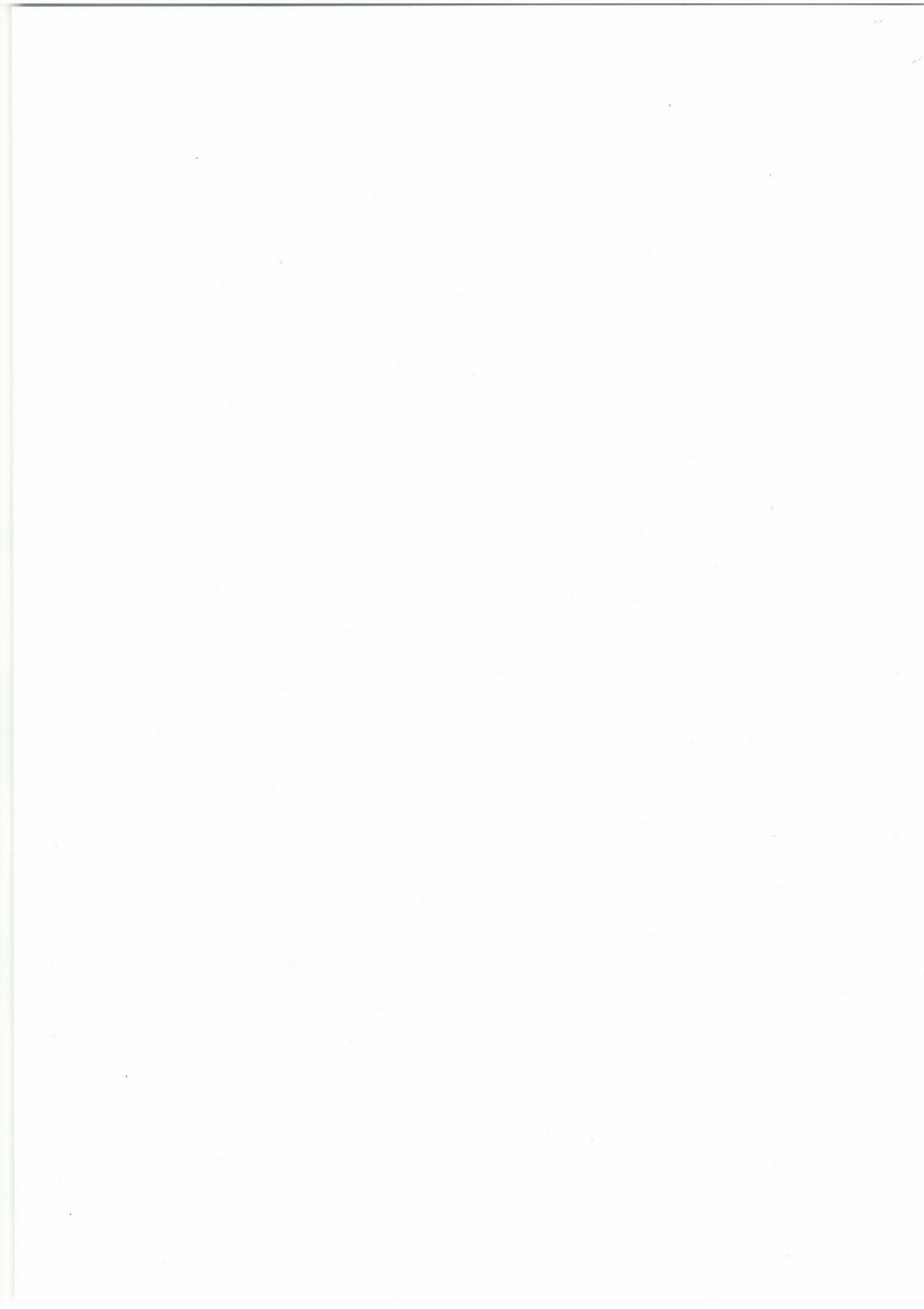
8. Receipt of this Notice may please be acknowledged.

Regional Director

To,
The Principal _____

Name and Address of the institution.

Copy to : The Manager / Secretary of the Society



ANNEXURE - F

**FORMAT OF AFFIDAVIT ON Rs.100/- STAMP PAPER TO BE SUBMITTED
ALONWITH 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

Check List for initial Scrutiny of application

Application Code : _____

1.	Name of the institution alongwith address		
2.	Name of the Society alongwith address		
3.	Course applied for		
4.	Whether applied for additional intake / additional course / New proposal		

Sl. No	Particulars	Submitted (Yes / No)	Page Nos.	Discrepancy pointed out by the office, if any
5.	Copy of the NOC of the Affiliating Body as required under clause 5 (3) of NCTE Regulations 2014.			
6.	Copies of Affiliation Order of the affiliating bodies for multi-disciplinary course(s) as required under clause 8 (1) of NCTE Regulations 2014.			
7.	Copy of Registration Certificate of the Trust/Society / Company			

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

Sl. No	Particulars	Submitted (Yes / No)	Page Nos.	Discrepancy pointed out by the office, if any
8.	Bye-laws of the Society/Trust/ Company showing objectives in the Bye-laws of the Trust/Society allow to run the Teacher Education/Physical Education courses			
9.	Certificate from the relevant department of the government certifying that the society is not for Profit/Charitable Trust/Society/ Company as required under clause 4 (d) of NCTE Regulations 2014.			
10.	Minority Status Certificate (MSC) issued by competent authority. (In case the Institution is a Minority Institution)			
11.	An affidavit in prescribed format on Non- Judicial Stamp Paper of Rs.100/-, attested by Notary Public/ Oath Commissioner as required under clause 8 (5) of NCTE Regulations 2014			
12.	A copy of the legally valid land document as per provisions of the NCTE Regulation, 2014 as amended from time to time as required under clause 8 (4) (i) of NCTE Regulations 2014.			

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

Sl. No	Particulars	Submitted (Yes / No)	Page Nos.	Discrepancy pointed out by the office, if any
13.	A copy of permission for land use or Land Use Certificate issued by the competent authority as required under clause 8 (5) of NCTE Regulations 2014.			
14.	A copy of Mutation Certificate issued by the competent authority as required under clause 8 (4) (i) & 8 (7) of NCTE Regulations 2014.			
15.	A copy of Non encumbrance certificate issued by the competent authority as required under clause 8 (4) (i) of NCTE Regulations 2014.			
16.	A copy of the approved building plan duly approved by the Competent Authority as required under clause 8 (7) of NCTE Regulations 2014.			
17.	Site plan showing the location of the building as per the land & revenue records of the concerned authority as required under clause 8 (4) (ii) of NCTE Regulations 2014.			

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

Sl. No	Particulars	Submitted (Yes / No)	Page Nos.	Discrepancy pointed out by the office, if any
18.	Building safety certificate issued by the competent authority as per National Building Code, compliant with National Disaster Management Authority guidelines as required under 8 (7) of NCTE Regulations 2014.			
19.	Fire safety certificate issued by the competent authority <i>(as specified in Norms & Standards for all the TEPs)</i>			
20.	A certificate to the effect that the institutional campus, building furniture is disabled friendly as per the persons with disability (PWD) and of the Govt of India. <i>(as specified in Norms & Standards for all the TEPs)</i>			
21.	Building Completion Certificate issued by the Competent Authority, if the building of the institution is completed at the time of submission of application as required under clause 8 (7) of NCTE Regulations 2014.			

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

ANNEXURE – H

Check List for Scrutiny of application after receipt of VTR

Application Code : _____

1.	Name of the institution alongwith address		
2.	Name of the Society alongwith address		
3.	Course applied for		
4.	Whether applied for additional intake / additional course / New proposal		
5.	Inspection conducted on		
6.	Name of the VT Members, with address and contact details		
7.	Remarks/ Observations of VT Members, if any		
8.	Whether the VT Members have verified all the copies of documents submitted by the institution with the original available in the institution.		
9.	Deficiencies as evident from the documents / VTR / CD Report		
10.	Building Completion Certificate issued by the Competent Authority Submitted (Yes / No) (pg __)		
	If yes, Building Completion Certificate issued by	Designation of the issuing authority for the Building Completion Certificate	
11.	If the application is for additional course / additional intake:-		
	a. Whether the VT Members have interacted with the staff for the existing TE Course (s)		

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

	b. Whether the VT Members have verified the original FDRs for the existing TE Courses		
12.	Whether the VT Members have submitted a report which is found correct and true after perusal of videography and other documents. If not, then reasons thereon.		

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

ANNEXURE – I

Check List for Scrutiny after receipt of reply to Letter of Intent

Application Code : _____

1.	Name of the institution alongwith address		
2.	Name of the Society alongwith address		
3.	Course applied for		
4.	Whether applied for additional intake / additional course / New proposal		
5.	Whether LOI was issued to the institution with some specific conditions		
6.	Date of receipt of reply of LOI (pg __)		
7.	Whether screen shot of Website of the institution submitted		
8.	Staff list approved by the affiliating body submitted / Approval of all the staff by the affiliating body attached.		
9.	Whether all the staff is qualified as per NCTE Norms.		
10.	Photocopy of the qualification certificates of all the staff attached.		

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

11.	Affidavit of all the individual staff on the prescribed format attached { <i>Format attached - Annexure - K</i> }		
12.	Affidavit from the Management on Rs. 100/- Stamp paper on the prescribed format regarding staff attached { <i>Format attached - Annexure - L</i> }		
13.	Fixed Deposit Receipt for Rs. 7.00 lacs and 5.00 lacs in joint account towards Endowment and Reserve Fund attached		

Signature of dealing officer with date

Signature of Reporting officer (s) with date

(Please note that this sheet is to be signed by all the officers in channel except the Regional Director)

ANNEXURE - J

Agenda Note to be placed before the Regional Committee

Application No. _____

If Appeal / Court Case		
Grounds of Rejection / Refusal of the institution	Directions of the Appellate authority / Hon'ble Court (s)	Order/ WP No. and date

SL. NO.	PARTICULARS	PAGE NOS.	REMARKS	OBSERVATIONS OF THE OFFICE
1	DETAILS AS PER ONLINE APPLICATION			
a.	Date of making online application			
b.	Date of receipt of hard copy/print out of application			
c.	Name of the Course applied for			
d.	Whether it is a new proposal/additional intake/additional course			
e.	No of units applied for			
f.	Name and Address of the Institution			
g.	Name and Address of the Society / Trust / Company			
h.	PAN / TAN No of the Institution/ Society / Trust / Company			
i.	Name of the affiliating body with address			
j.	Management (Private/ Deptt. of University/ Govt./Govt. Aided /Govt. Self Finance/ Constituent college of University			
k.	Whether the institution is a Minority institution			
l.	Whether institution is for Co-Ed / Boys / Girls			
2	CERTIFICATE FOR BEING A NOT FOR PROFIT			
	Whether a Certificate to the effect that the institution has been established as "Not for	Date of Issue		Issuing Authority

	Profit" submitted. If Yes, Pg No.		
3	DETAILS OF NOC FROM THE AFFILIATING BODY (Pg___)		
	Whether NOC submitted or not	Name of NOC issuing body	Date of NOC issued
			Course for which NOC is issued
4	INSTITUTION IS RUNNING A MULTI DISCIPLINARY COURSE (S) AND IS COMPOSITE AS PER 2 (b) OF NCTE REGULATIONS, 2014.		
	Whether the institution is running a Multi-disciplinary course (s)	If yes, name of the course with details of affiliating body	Complete Address of the institution where the above course (s) are running.
5	RUNNING TEACHER EDUCATION COURSE (S)		
	Whether the institution is running a Teacher Education Course (s)	If yes Name of the course (s)	NCTE Recognition order No & Date
			Complete Address of the institution where the above course (s) are running.
6	LAND DOCUMENTS (Pg ___)		
	Title of land vested in the name of Society/ Trust/ Institution / Individual, please specify	Date of Registration of Land	Whether land document submitted is certified or not
7	SITE PLAN (Pg ___)		
	Whether site plan submitted	Whether the land is in a single plot	In case more than one plot is mentioned in the land documents, whether all the plots are adjacent to each other
8	LAND POSSESSION CERTIFICATE / MUTATION CERTIFICATE (Pg ___)		
	Whether LPC / Mutation Certificate Submitted	Owner of land as per LPC / Mutation Certificate	Date of Issue
			Issuing Authority
8	BUILDING PLAN (Pg ___)		
	Submitted Building Plan approved by	Page No.	Designation of the approving authority for the Building Plan

c.	Demarcated land area for the proposed course (in Sq. mtrs)									
d.	Total built up area of the institution (in Sq. mtrs)									
e.	Demarcated built up area for the proposed course (in Sq. mtrs)									
(* The information be entered after receipt of Visiting Team Report										
17 Recommendation from the State Government										
	Date of letter sent to the State Govt. for recommendation (Pg __)	Date of First Reminder sent to the State Govt. (Pg __)	Date of Second Reminder sent to the State Govt. (Pg __)							
	Whether recommendation from the State Govt. received or not (Pg __)	If received, the gist of comments from State Government								
After receipt of Visiting Team Report										
	Inspection conducted on	Date VTR uploaded	Date of receipt of hard copy of VTR (pg__)	Whether CD enclosed with VTR	Name of the VT Members					
1.	Remarks/ Observations of VT Members, if any									
2.	Deficiencies as evident from the documents / VTR / CD Report									
3.	Whether the VT Members have verified all the copies of the documents submitted by the institution and the same matches with the original available in the institution. If no, details thereof.									
4.	If the application is for additional course / additional intake :-									
	a. Whether the VT Members have verified the original FDRs for the existing TE Courses									

	b. Whether the VT Members have interacted with the students for the existing TE Course (s). If yes, the students present on the date of inspection.			
	c. Whether the VT has browsed the website of the institution. If yes, the information specified in the recognition order has been hosted on the website of the institution			
	d. Whether the VT Members have interacted with the staff for the existing TE Course (s). If yes :-			
	Whether the staff for the existing course is approved by the affiliating body	Number of teaching staff for existing courses (s) present before the Visiting Team	Observations of the VT Members	
5.	Infrastructural facilities			
	Size of Multipurpose hall	Class rooms		No of Laboratories available
		No of Classrooms	Size of Classrooms	
6.	ICT Resource Centre			
	Internet / Wi-Fi facility available	No of UPS Available	Availability of Projector	No of Computers available
7.	Library Resources			
	No of titles	No of books	No. of Educational Journals	Seating capacity in library
9	BUILDING COMPLETION CERTIFICATE (Pg ___)			
	Building Completion Certificate issued by	Designation of the issuing authority for the Building Completion Certificate	Year of completion of construction of the building	
After receipt of reply to LOI for staff				
a.	Date of LOI issued to the institution	Date of reply of the institution	Whether print out of screen shot of the website attached	
b.	Staff profile approved by the affiliating body submitted / Approval of all the staff by the affiliating body attached.	Affidavit of all the individual staff attached. If no, details of staff not submitted Affidavit	Affidavit from the Management on Rs. 100/- Stamp paper regarding staff attached	Whether all the staff is qualified as per NCTE Norms. If no, details of staff not qualified.

c.	Fixed Deposit Receipt towards Endowment and Reserve Fund			
	FDR in original for Rs. 5.00 lacs towards Endowment Fund submitted.	FDR in original for Rs. 7.00 lacs towards Reserve Fund submitted.	Whether both the FDRs are converted into joint A/c with NCTE.	Whether the institution had submitted a certificate from the Bank to the effect that the same will not be encashed without consent of NCTE.
After receipt of reply to Show Cause Notice, wherever applicable				
	Date of Show Cause Notice	Ground of Show Cause Notice		
	Date of reply to SCN	Gist of reply to SCN		
	Observations of the office after examination of reply to SCN			

While placing the Agenda before the Regional Committee, the gist of all the observations / discrepancies pointed out by Office vis-à-vis NCTE Regulations may be summarized alongwith the recommended course of action as envisaged under clause 7 (12) of NCTE Regulations 2014 and point (g) of SOP.

ANNEXURE – K

FORMAT OF AFFIDAVIT TO BE SUBMITTED BY THE STAFF
ON RS. 10/- STAMP PAPER

I, son of / daughter of / wife of / aged
..... Resident of take oath and state my Bio-Data
as given below:-

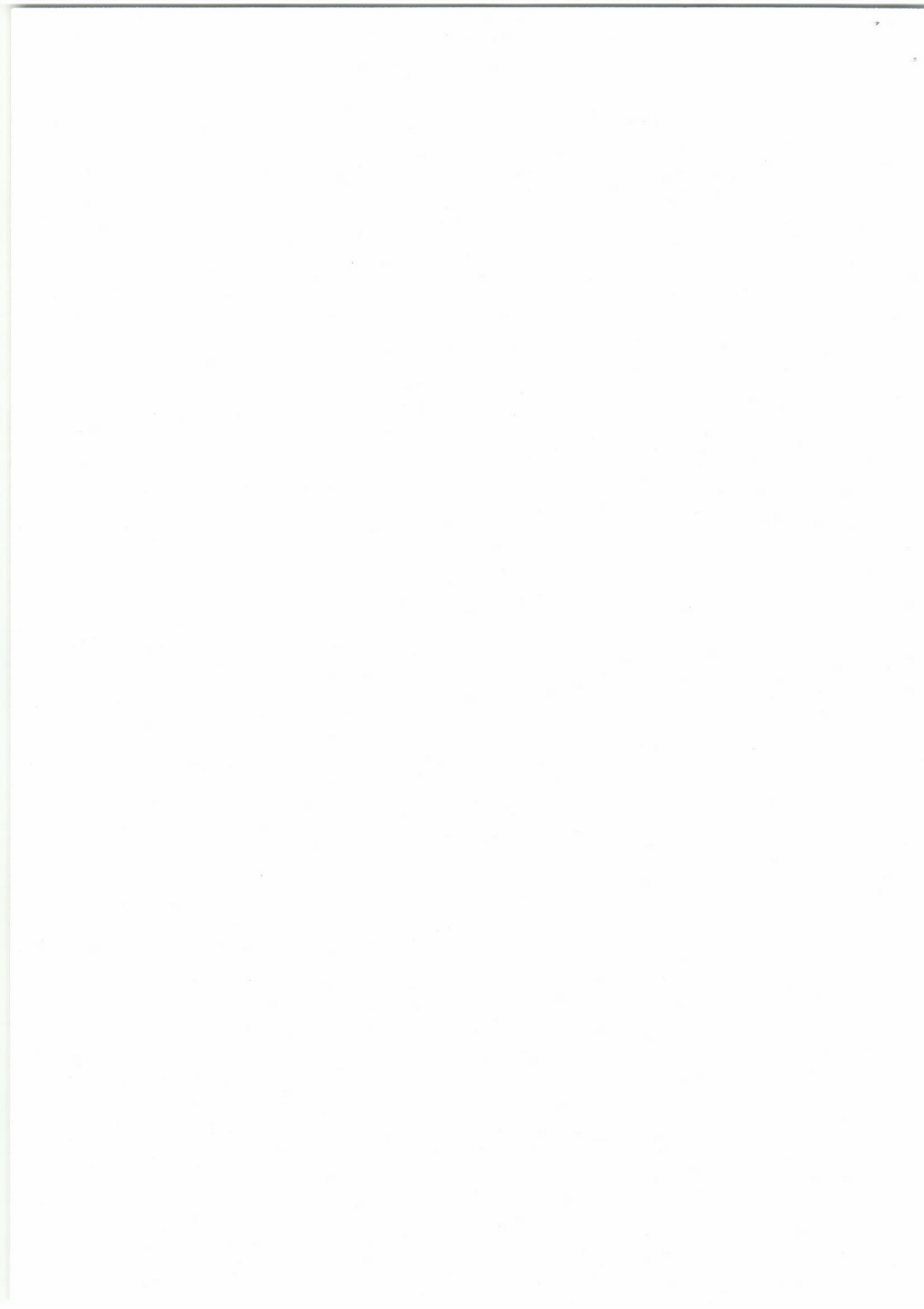
Name of the candidate				
Father's Name				
Date of Birth				
Permanent Address with contact No. / Fax No.				
Educational Qualification				
Sl. No.	Degree	College and University from where degree obtained	Year of passing	% age of marks
1.	B.Ed.			
2.	M.Ed. / MA (Education)			
3.	PG with subject			
4.	NET / SLET / Ph.D			
Experience (in teacher training college) (Please attach experience certificates)				
Name of college & Address		From	To	Part time / regular
Experience (in school) (Please attach experience certificate)				
Name of school & Address		From	To	Part time / regular

I hereby certify, that data submitted above is true to the best of my knowledge and belief. I shall be responsible for any misrepresentation of facts.

I also certify that I have been appointed in this institution as Principal / Lecturer in (Name of college / institution will full details). I also certify that I will not work in any other institution after my joining in this institution without appointment of alternate arrangement in the college and the same will be intimate to _RC-NCTE. The attested copies of marks sheets / degree / certificates are enclosed.

Signature of staff





ANNEXURE – L

**FORMAT OF AFFIDAVIT TO BE SUBMITTED BY THE MANAGEMENT ON RS.
100/- STAMP PAPER**

I, _____ son of Shri _____ aged _____ years, resident of _____ (address) in the capacity of Chairman/President (or any authorised person of the Management) of _____ (Name of the Society/Trust with complete address as in the society registration papers) take oath and state as under:-

1. That I am Chairman/President (or any authorized person of the management) of _____ (Name of the Society/Trust with complete address as in the society/trust registration papers) and signing this Affidavit of behalf of it for which I am fully authorized.
2. That the managing society/ trust has made an application to the _RC, NCTE for running an institution, namely, _____ (name & address of the institution) for _____ (name of the course) with an intake of _____. The institution after fulfilling all the provisions of the NCTE Act, Rules & Regulations has got letter of intent under clause 7(13) of the NCTE Regulations, 2014 vide _RC, NCTE letter No. _____ dated _____.
3. That the managing society/trust of the institution has constituted the Selection Committee for appointment of faculty as per the policy of the State Government/University/UGC and the following were the Members of the Committee :-

Name	Status of Selection Committee

4. That the following faculty members have been appointed by the duly constituted selection committee having requisite qualifications and experience as prescribed in NCTE Regulations.

Details of qualifications and experience are given in Annexure – I.

Sr. No.	Name of the staff & Designation	Qualifications*				Experience	
		B.Ed. (with %)	M.Ed. (with %)	PG (Subject %)	NET/SLET/Ph.D. (Subject with %)	Teacher Training college	School

5. The staff has joined/shall join the duty in the institution and will not be permitted to serve in any other institution on regular basis without appointing eligible teacher/principal and the same will be intimated to the affiliating body and _RC-NCTE.
6. That the academic staff of the institution (including part-time staff) is/shall be paid salary in such scale of pay as prescribed in the UGC/University/affiliating body from time to time. The supporting staff shall be paid as per the UGC/State Government/Central Government pay scale structure.
7. That the society/trust has appointed required number of Technical support staff and Administrative Staff of the requisite qualifications and experience as per norms and standards laid down by NCTE/State Government/Affiliating body. Salary is being/shall be paid to the staff members through bank/account payee cheque as prescribed by the NCTE.
8. The management of the institution shall discharge all the statutory duties relating to pension, gratuity, provident fund, etc for its employees as per the admissibility. The institution shall follow the norms of the NCTE as amended from time to time.
9. The details of staff appointed shall be displayed on the official website of the institution i.e. www._____ (website of the institution).
10. The information about staff has been verified from the original records submitted by the candidate and found correct.

(Signature of Deponent)

Verification

I, _____, the above named deponent do hereby verify that the statement made by me in para (1) to para (10) are true and correct to the best of my knowledge and belief. This

Affidavit is being submitted to the _RC-NCTE for grant of formal Recognition as per clause 7(16) of the NCTE Regulations, 2014 in compliance to the Letter of intent prior to grant of recognition/permission issued by _RC vide letter No. _____ dated _____, and if any variation/incorrect or deliberately distorted information is found, the sole responsibility shall be of the managing society/trust only and the managing society/trust shall be liable for action as per provisions of the NCTE Regulations, 2014.

(Signature of Deponent)

Place :-

Date:-

