

I, OM PRAKASH, Son of SH. BAJRANG LAL, Resident of VILL-RASOOLPUR POST-KAYAMSAR, TEHSIL-RAMGARH SHEKHAWATI DIST-SIKAR (RAJ.) PIN CODE-331024 and Secretary of SHRI B L INDORIA SHIKSHAN SANSTHAN, VILL-RASOOLPUR POST-KAYAMSAR, TEHSIL-RAMGARH SHEKHAWATI DIST-SIKAR (RAJ.) PIN CODE-331024 certify that I have been authorized by the Management of the above mentioned institution to give this Affidavit on behalf of the institution, within at present offers B.A.B.Ed / B.Sc.B.Ed 4 Year Integrated course of B.A.B.Ed / B.Sc.B.Ed 4 Year Integrated duration (File Code No. NRC/NCTE/NRCAPP201616477) with an annual intake of 100 Seat (2 UNIT). It is further certified that the Management has studied the National Council for Teacher Education (Recognition Norms and Procedure) Regulations, 2014(2017) carefully and has understood their implications for the existing Teacher Education Institutions offering NCTE recognized teacher education programme(s).

In convey my willingness for two units of the proposed B.A.B.Ed / B.Sc.B.Ed 4 Year Integrated course (strik off if not applicable)

3. Further, I have been authorized by the Management to state that the institution shall fulfill the revised Norms relating to infrastructure, instructional facilities, enhanced amount of Endowment and Reserve Funds, imber and qualifications of Teaching Staff, Curriculum and implementation strategies, in view of the change in duration / intake of the programme(s) offered in the institution within the time limit allowed by NCTE. Foler pur (Silver)

> This Docoment is Produced Before me at my/Fatehour Office

Please: RASOOLPUR (SIKAR)

Date: 01.05.2019

Rajast

Signature Name and Designation

Dansthan