



NATIONAL BOARD OF VOCATIONAL TRAINING (NBVT)

An ISO 9001 : 2015 Certified organization, Registered under The Indian Public Trust Act.
(CCL-IV-00005-2019-20) Regd. Under Planning Commission, Govt. of India, MHRD, Regd. Under
Govt. N.C.T. New Delhi Regd. Under MSME Govt. of India

FRANCHISE APPLICATION FORM

Section A: Applicant / Organization Details

1. Name of Applicant / Institute: _____
2. Type of Entity: () Individual () Partnership () Pvt. Ltd. Co. () Society/Trust
3. Registered Address: _____
4. Contact Person: _____
5. Designation: _____
6. Phone No: _____ Email: _____
7. Website (if any): _____

Section B: Proposed Franchise Centre Details

1. Proposed Centre Address: _____
2. City/District: _____ State: _____
3. Total Area of Premises (in sq. ft.): _____
4. Ownership Status: () Owned () Rented () Leased
5. Facilities Available:
 - Classrooms (No. & Size): _____
 - Lab: () Yes () No Capacity: _____
 - Practical Labs / Workshops: _____
 - Library/Resource Room: _____

Section C: Infrastructure & Resources

1. No. of Machines Available: _____
2. Internet Facility: () Yes () No Speed: _____
3. Projector / Smart Class Facility: () Yes () No
4. Furniture & Seating Capacity: _____
5. Parking Facility: _____

Section D: Faculty & Staff

1. No. of Trainers / Teachers: _____
2. Qualification of Trainers: _____
3. Administrative Staff: _____
4. Support Staff: _____

Section E: Courses Proposed

Please tick the vocational courses you wish to offer under NBVT:

- Tailoring and Embroidery
- Beauty parlour
- Coaching Centre
- Computer Centre
- IT Courses
- Skill Development
- Job-oriented Training
- Technical Trades
- Management
- Soft Skills
- Others (Specify): _____

Section F: Financial Details

1. Expected Investment Capacity: Rs. _____
2. Bank Reference (optional): _____
3. PAN / GST No.: _____

Section G: Declaration

I/We hereby declare that the information provided above is true to the best of my/our knowledge. I/We agree to abide by the rules, regulations, and guidelines prescribed by the **National Board of Vocational Training (NBVT)** for establishing and operating a franchise training centre.

Date: _____

Place: _____

Applicant's Signature

Name: _____

Designation: _____