To, The chairman & Founder Director National Council of Educational Training Institute and Research Recognition of HONE SKILL WELFARE FOUNDATION (Govt Of India) Burari Mukundpur Delhi India 1100042
Sub: consent letter for Training provider
Dear sir,
We are already talked about the same, and we would like to become as a Training provider for Department of IT Computer, Department of IT And Computer courses we are sending our proposals on above subject for center approval Under the scheme of recognition of prior Learning scheme. Kindly confirm and start the process for the same.
Thanking you
Yours faithfully

(BINA GROUP OF INSTITUTIONS Authorized signed with stamp)

(PRITI KUMARI)

CENTER REGISTRATION APPLICATION FORM

Full Name PRITI KUMARI Email binacentrallibrary@gmail.com Phone Number 8757512020 Designation CEO/FOUNDER Last Qualification PG Pass Port Pic Qualification M.COM Qualification Doc Image not found. AdhaarCardNumber 5142 2095 7168 Aadhar Card PAN Card Number IMPPK0092H PAN Card Doc PRITI KUMARI Binacentrallibrary@gmail.com A757512020 CEO/FOUNDER A777512020 A77	Personal Information		
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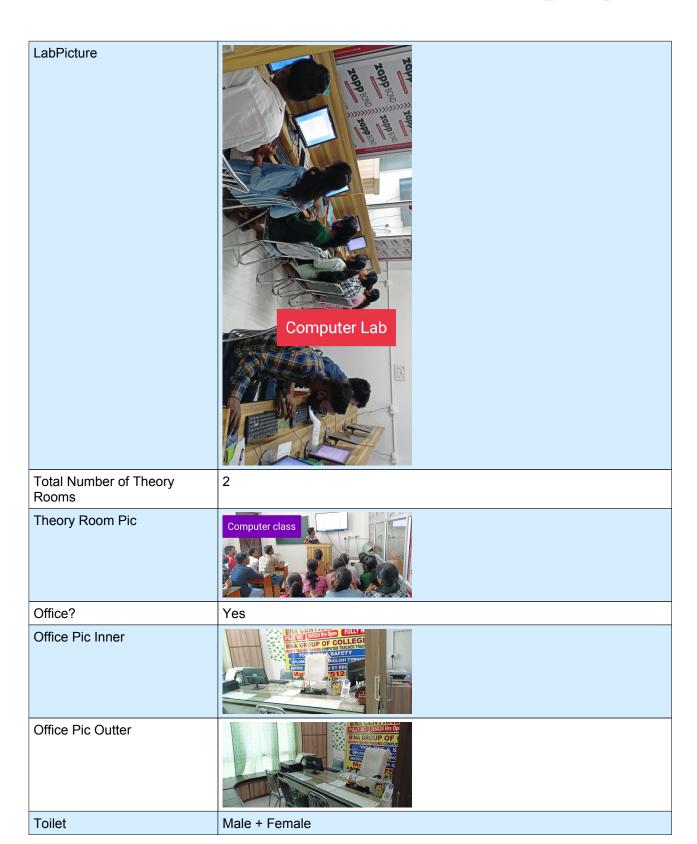
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National Council of Educational Training Institute and Research

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(PRITI KUMARI)

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