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 Paramedical & Health Science 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

(RAJMANI KUMAR)

(NATIONAL CAREER OF EDUCATIONAL INSTITUTE Authorized signed with stamp)



CENTER REGISTRATION APPLICATION FORM

Personal Information	
Full Name	RAJMANI KUMAR
Email	rksinha986@gmail.com
Phone Number	8340591349
Designation	
Last Qualification	
Pass Port Pic	
Qualification	
Qualification Doc	Image not found.
AdhaarCardNumber	376142933955
Aadhar Card	अगटवकर विभाग भारत सरकार NCOME TAX DEPARIMENT GOVT. OF INDIA Warmannit Account Number Card EPNPKS563N Parmannit Account Number Card
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Signature	R	
Permanent Address	S/O: MITHLIES KEWAT, SUNDAR BIGHA, P.O: - SURHI, SURHI, NALANDA, MEYAR, BIHAR, 803116	
State	BR	
PIPin	803116	
	Institute Details	
Faculty	Department of IT Computer Department of Paramedical & Health Science	
Institute Name	NATIONAL CAREER OF EDUCATIONAL INSTITUTE	
Address	Budhauli Bazaar Near Ganga Manihari Sheikhpura	
State	BR	
District	Sheikhpura	
City	Sheikhpura	
Pin Code	811105	
Phone	8340591349	
Website		
Registered	Yes	
Туре		
Registration Name		
Registration No		
Registration Doc	Image not found.	
	Infrastructure Details	
Total Area	200	
Geo. Location	Urban	
Total PC	3	
Total Staffs	4	
Total Number of Practical Labs	1	



(RAJMANI KUMAR)



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