



DR. BABASAHEB AMBEDKAR OPEN UNIVERSITY

(Established by Government of Gujarat)

'Jyotirmay' Parisar, Opp. Shri Balaji Temple, Sarkhej-Gandhinagar Highway,
Chharodi, Ahmedabad - 382 481.

Tel. +91 2717 297170 M. +91-9376986522

E-mail : kmro@baou.edu.in , Website : www.baou.edu.in

Application for Establishment of Study Center

Important Note:

1. Kindly ensure that your institution fulfills all the requirements as stated in the norms for becoming study center as per the program (s) selected.
2. This form has to be filled only by the key person committed to the operations of the proposed Study Center.
3. Applicant has to submit one-time Study Centre Affiliation fee Rs. 10,000/- with this application in the form of a DD (Demand Draft) in favor of Dr. Babasaheb Ambedkar Open University payable at Ahmedabad.
4. In the event of Non Recognition, Rs. 9000/- will be refunded.

Applicant for : The Programmes offered under each stream (Tick on the Domain & appropriate Programme in the Annexure A)

Foreign Languages		Refer Annexure A
Diploma Programmes		Refer Annexure A
Bachelor Programmes		Refer Annexure A
Post Graduation Diploma		Refer Annexure A
Master Programmes		Refer Annexure A

Name & Address of Applicant:	
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A. Proposed Study Center Profile

1.	Name of the Institution/ College	
2.	Type of Institution/ College (Tick on appropriate option) Colleges/ Institutions includes aided and unaided both. Select the appropriate option. Kindly enclose attested deeds, Memorandum and Rules/ Regulations (as applicable)	<input type="checkbox"/> Trust <input type="checkbox"/> Society <input type="checkbox"/> Institute <input type="checkbox"/> Autonomous College <input type="checkbox"/> Government <input type="checkbox"/> Grant in Aid College <input type="checkbox"/> University <input type="checkbox"/> Other
3.	Name of the Trust / Society running the institution	
4.	Date / Number / Place of Registration of trust / Society/Institute : (Please attach Registration Certificate)	
5.	Registered under which Act	<input type="checkbox"/> Society <input type="checkbox"/> Trust <input type="checkbox"/> Other
6.	Postal Address of the Institution/ College	
7.	Communication Details: a. STD Code: b. Contact Number: c. Fax Number: d. Mobile Number: e. Email Address: f. Website Address:	

8.	Document relating to address proof of the Institute (Lease Deed/Rent Agreement/ Sale Deed/ Ownership Document)	<input type="checkbox"/> Enclosed	<input type="checkbox"/> Not Enclosed
9.	Floor Plan /Layout Map of the Institution	<input type="checkbox"/> Enclosed	<input type="checkbox"/> Not Enclosed
12.	Photograph of Institution, Classrooms, Computer lab, Library, Reception etc.,	<input type="checkbox"/> Enclosed	<input type="checkbox"/> Not Enclosed

B. Details of Head/ Principal of Institution / College

1.	Name	
2.	Designation	
3.	Postal Address :	
4.	Communications Connectivity of a. STD Code b. Phone Number c. Fax Number d. Mobile Number e. Residence Number f. Email Address	
5.	Educational Qualifications (Kindly Enclose the Resume + Certificates)	
6.	Profession and Experience	
7.	Photo ID Proof (Kindly Enclose the Copy)	<input type="checkbox"/> Enclosed <input type="checkbox"/> Not Enclosed
8.	Pan Number (Kindly Enclose the Copy)	<input type="checkbox"/> Enclosed <input type="checkbox"/> Not Enclosed
9.	One Colored Photograph	<input type="checkbox"/> Enclosed <input type="checkbox"/> Not Enclosed

C. Infrastructural Facilities

1.	Location of proposed Institution Area (Kindly tick the whichever is applicable)	<input type="checkbox"/> Metro <input type="checkbox"/> State Capital <input type="checkbox"/> District HQ <input type="checkbox"/> Rural <input type="checkbox"/> Town
2.	The Building of Colleges/ Institution (Kindly tick whichever is applicable & furnish the documents)	Owned /Rented/Leased/Other
3.	Total Carpet Area of Institution (in Sq. ft.)	
4.	Total Site area of Institution (in Sq. ft.)	
5.	Type of Flooring of Institution	
6.	No. of floors available	
7.	Office is Ready to use	<input type="checkbox"/> Yes <input type="checkbox"/> No

8. Institution Facilities available:

Sr. No.	Type of Facility	No. of Rooms	Area (in sq. Ft.)	Seating Capacity
1.	Class Room			
2.	Computer Laboratory			
3.	Library			
4.	Faculty Room			
5.	Office Room			
6.	Student Common Room			
7.	Toilet, Corridor, Staircases, Common area, etc.			

9. Facilities in the Computer Laboratory

Sr. No.	Type of Facility	Count
1.	Server Computer	
2.	Client Computer	
3.	Printer	
4.	Scanner	
5.	UPS	
6.	CD/DVD Writer	

10. Type of Internet Facility

Leased Line ☐ Broad Band ☐ Dialup ☐ Others ☐

11. Details of Computers

Type	Processor	Ram	HDD	Network (Y/N)	Internet (Y/N)
Server Computer					
Client Computer					

(Attach list as per the above stated format for details of Computers)

12. Details of Software Available:

Sr. No.	OS/COMPILER/PACKAGE/PROGRAMME/RDBMS/ LANGAUAGE/APPLICATION DEVELOPMENT SOFTWARE	Version

13. Library

Sr. No.	Category	Count
1.	Reference Books	
2.	Text / Subject Books	
3.	Periodicals Subscribed	
4.	Journals Subscribed	
5.	Newspapers Subscribed	
6.	Educational CDs/DVDs	
7.	E-Books for Reference	
8.	Magazine Subscribed	

14. Equipment's Available

Sr. No.	Equipment	Count
1.	LCD Projector	
2.	Fax	
3.	Photocopier	
4.	CD	

D. Connectivity

1.	Nearest Railway Station	
2.	Nearest City Bus Stand	
3.	Distance from Railway Station	
4.	Distance from City Bus Station	
5.	Distance from Nearest National / State Highway	

E. Study Center Coordinator Details

1.	Name	
2.	Communications connectivity of study center coordinator a. STD Code b. Phone Number c. Fax Number d. Mobile Number e. Residence Number f. Email Address	
3.	Educational Qualifications: (Kindly attach Resumes + Certificates)	
4.	Profession & Experience (Kindly enclose the details Resume of the Study Center Coordinator)	

F. Faculty Details

Sr. No.	Name	Designation	Qualification	Teaching / Industry Experience (in Years)	Subject Taught by Him/her

G. Is the institution recognized as study center of any other university or equivalent? – Yes/No
If answer is Yes, Kindly give the following details:

Sr. No.	Name and Address of Recognizing University	Recognized As	Programmes Undertaken	Last Year Students No.

H. Details of Remittance of Study Center Processing Fee:**1. Amount Remitted:**

Study Center Affiliation fee of Rs. 10,000/- (Rupees Ten Thousand Only) in favor of "Dr. Babasaheb Ambedkar Open University payable at Ahmedabad.

2. Demand Draft Details :

DD No	MICR No.	Date	Bank Name	Branch

I. Amenities (Provide Attested Photographs)

1	Electric fluorescent tubes, fax & proper furniture are fitted in the class rooms and in the office	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Drinking water arrangements with water filter	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Separate toilet for boys & girls	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Whether library facility shall be provided to the students of Dr. Babasaheb Ambedkar Open University	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Notice Board	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Room for Office Staff	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Location for Study Center (SC) Name Board	<input type="checkbox"/> Yes <input type="checkbox"/> No
8	First Aid Facility	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	Playground if any	<input type="checkbox"/> Yes <input type="checkbox"/> No
10	Transport, Bank & Post Office Facility	<input type="checkbox"/> Yes <input type="checkbox"/> No
11	Vehicle Parking	<input type="checkbox"/> Yes <input type="checkbox"/> No
12	Seating Capacity for Exam	<input type="checkbox"/> Yes <input type="checkbox"/> No

DECLARATION

(Following letter must be on official letterhead of the concerned society/trust.)

1. I / We certify that all the information given above and in the preceding pages signed by me / us is / are complete and correct.
2. I / We declare that the institute / college will abide by all the rules and directions of Dr. Babasaheb Ambedkar Open University given time to time.
3. I / We declare that I / We am / are authorized to sign on behalf of my organization and that my directors / Trustee members (where relevant) are in total agreement of my / our application.
4. In case of any information furnished by me / us is found wrong or incomplete, I / We declare that the Study Center may be derecognized and is also open to any action as per law.
5. I / We undertake not to do any advertisement of our own in print / electronic media without the prior permission of Dr. Babasaheb Ambedkar Open University.
6. I / We hereby undertake that if it is ever found that the Study Center is not able to run as per the norms, rules and procedures laid down by Dr. Babasaheb Ambedkar Open University, the Dr. Babasaheb Ambedkar Open University shall be free to withdraw the study centre recognition.
7. I / We understand that Dr. Babasaheb Ambedkar Open University reserve the right to terminate the study centre registration if it is found that I / We have knowingly made a false declaration in the form.
8. I / We understand that the approval of my / our institution as Study Centre shall be done as per the norms of the Dr. Babasaheb Ambedkar Open University.
9. I / We understand that Dr. Babasaheb Ambedkar Open University reserve the right to reject the application without assigning any reason.

Place:

Date:

Head of the Institution Signature, Name and Seal

Checklist for Submission of Application For Vocational & Professional Courses

Sr. No.	Particulars	Yes	No
1	Govt. Approved Unit Affiliation Letter (Last Three Years) *Compulsory		
2.	Registration Certificate of Trust/Society/Institute/College (If Available)		
3.	Copy of constitution /MOA of Trust/Society/Institute		
4.	Resolution of Society/Trust / Institute for establishing study center (If Available)		
5.	Society/Trust/ Institute/College Audit Report (Last Three Years)		
6.	Address proof of Institution (Lease Deed/ Rent Agreement/ Sale Deed/Ownership Documents)		
7.	Society/Trust/ Institute/College Pan No.		
8.	Floor Plan/Layout Map of the Institution (Self Attested)		
9.	Society/Trust/ Institute/College Academic Report (Last Three Years)		
10.	Resume of Head/Principal (Copies of Academic Certificates and Bio-data)		
11.	Resume of Study Center Coordinator (self-Attested Copies of Certificate and Bio-data)		
12.	Resume of Subject wise Academic Faculties (Qualification will be as per criteria mentioned in PAC/PPR for Diploma & Certificate Course and the minimum Qualification for Assistant Professor for Degree Courses shall remain as per UGC Guideline.)		
13.	In case of absence or unavailability of Counselors in the said college if the college hears faculty from other college/ Institute, the college will have to attach counselor's consent letter mandatory.		
14.	Resume of Supporting/Admin/Staff (Copy & Bio-data With Principal sign & Stamp)		

15.	Digital Color Photographs of following needs to be submitted by the Institute/college after the allotment of LSC.		
	<input type="checkbox"/> Exterior building & playground (if any)		
	<input type="checkbox"/> Interior building & classrooms available		
	<input type="checkbox"/> Library & Seminar hall / Auditorium		
	<input type="checkbox"/> Laboratory		
	<input type="checkbox"/> Front Office & Administrative Room		
	<input type="checkbox"/> Room for Study Center Head		
	<input type="checkbox"/> Drinking Water Arrangement		
	<input type="checkbox"/> Laboratory		
	<input type="checkbox"/> Front Office & Administrative Room		
	<input type="checkbox"/> Room for Study Center Head		
	<input type="checkbox"/> Drinking Water Arrangement		
16.	Undertaking (Rs.100 Franking / Rs.100 Notarized)		
17.	Centre Affiliation Fee DD “Demand Draft of any nationalized bank for “Study Center Affiliation fees” in the name of Dr. Babasaheb Ambedkar Open University payable at Ahmedabad of Rs. 10,000/-“		

14.	<p>For Hotel Management Only</p> <p>List of the Department wise Assets:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Basic Kitchen for food production practical <input type="checkbox"/> Bakery setup for basic bakery practical <input type="checkbox"/> Housekeeping practical room with all required equipments of housekeeping department <input type="checkbox"/> Food & Beverage practical restaurant with proper seating arrangement for min 12 no or min 4 tables, bar computer, crockery, cutlery etc. <input type="checkbox"/> Front office lobby for front office practical with proper reception counter, telephone and other requirements of front office Practical or Tie up with 3 or 4 or 5 Star Category Hotels/ Resorts / Club for Practical Purpose <input type="checkbox"/> Having enough classrooms and infrastructure for conduct theory classes or counseling sessions. 		
15.	<p>Counselors :</p> <p>No. of Counselors: <input type="text"/> Full Time : <input type="text"/> Part Time: <input type="text"/></p>		

Note: 1. The applicant will be rejected, if required documents for the purpose are not enclosed.

2. All rights reserved with Dr. B.A.O.U in order to extend the recognition for the study center.

3. Minimum 20 Students are required to be enrolled in each programme per batch. Failing which the student will be transferred to the nearby center. In such a situation the center will be in non-operational state for the given academic session and would be activated for the next round of admission.

Format for Resolution of the Society/Trust
(To be submitted duly filled on letterhead of the Institution/Society/Trust)

It is resolved unanimously in the meeting of the governing body of.....
held on Under the chairmanship of Shri..... that the study centre of the
Dr.Babasaheb Ambedkar Open University will be established in

If Dr.Babasaheb Ambedkar Open University permits the College/Institute/Society/Trust to establish the centre, we undertake to provide all the necessary academic and infrastructural facilities and cooperate for the smooth and efficient functioning of the Study Centre. We shall abide by the rules and regulations of the Dr.Babasaheb Ambedkar Open University, prescribed and revised from time to time.

If the Study Centre closed down for any reason, all material/books supplied by the Dr.Babasaheb Ambedkar Open University shall be returned to the University within stipulated time period given by them.

Proposed By

Seconded By

(Seal of the Institution)	Signature with Date	Signature with Date
	Name: Secretary Institution / Foundation / Trust	Name: Chairman/President Institution / Foundation / Trust

Annexure “A”

(Tick the appropriate programme to be conduct at the Study Center)

Sr. No.	Name of Course	Code	Duration	Eligibility	Tick Appropriate Programmes
DIPLOMA PROGRAMME					
1	Diploma in Business Administration	DBA	1 Year / 2 Semester	12th Pass	
2	Diploma in Computer Application	DCA	1 Year / 2 Semester	12th Pass	
3	Diploma in Health Sanitary Inspector	DHSI	1 Year / 2 Semester	12th Pass	
4	Diploma in Hospitality and Tourism Management	DHTM	22000 (Per Year)	1 Year	
BACHELOR PROGRAMME					
1	Bachelor of Business Administration	BBA	3 Years / 6 Semester	12th Pass (Any Stream)	
2	BBA in Air Travel Management	BBAAT	3 Years	12th Pass (Any Stream)	
3	Bachelor in Computer Application	BCA	3 Years / 6 Semester	12th Pass (Any Stream)	
4	BCA in Multimedia (BCAMUL)	BCAMUL	3 Years	12th Pass (Any Stream)	
POST GRADUATE DIPLOMA PROGRAMME					
1	Post Graduate Diploma in Business Administration	PGDBA	1 Year / 2 Semester	Graduate (Any Stream)	
2	Post Graduate Diploma in Finance	PGDF	1 Year / 2 Semester	Graduate (Any Stream)	
3	Post Graduate Diploma in Marketing	PGDM	1 Year / 2 Semester	Graduate (Any Stream)	
4	Post Graduate Diploma in Human Resource	PGDHR	1 Year / 2 Semester	Graduate (Any Stream)	
5	Post Graduate Diploma in Computer Application	PGDCA	1 Year / 2 Semester	Graduate (Any Stream)	
MASTER PROGRAMME					
1	Master in Social Work	MSW	2 Year / 4 Semester	Graduate (Any Stream)	

Undertaking (on stamp paper of Rs 300/-)

We,

1. _____,
The Chairman of _____,
S/O _____,
And residence of _____,
2. _____,
The Secretary of _____,
S/O _____,
And residence of _____,
3. _____,
Study Center Head of _____,
S/O _____,
And residence of _____,

We, the above mentioned, are the authorized signatories of the Institute;

_____ managed by _____. With the reference to our application for the purpose of "Approval of the Study Center", we, solemnly, hereby agree for and on behalf of the Management of the Study center to the term and conditions along with the procedure mentioned below;

1. We have gone through the rules, regulations, guidelines, instructions, norms and standards prescribed by the Dr.Babasaheb Ambedkar Open University, Ahmedabad and its related apex bodies for establishing, managing and operating the Study Centre and we shall abide by all these rules, regulations, guidelines/instructions/norms and standards, notified at the moment and to be notified/declared by Dr.Babasaheb Ambedkar Open University and its related apex bodies from time to time.
2. We are aware that the study centre is for the purpose of conducting the academic, administrative and support service activities as well as for the functions as per the rules, regulations, guidelines, instructions, norms and

standards prescribed by authorities notified in the Point No. 1 of this undertaking. Furthermore, that we will offer / commence / conduct only such academic programmes of the Dr.Babasaheb Ambedkar Open University as are allowed, to be commenced in the study centre at the approved location and for academic session(s), by Dr.Babasaheb Ambedkar Open University through its letter/communication.

3. We are aware to perform all the academic activities such as planning & organizing counseling sessions/ contact programmes, providing opportunity to the learners for face-to-face interaction with counselors / experts, providing library and laboratory facilities, provide opportunities to students to meet their fellow students, providing guidance related to assignments, assessing the assignment submitted by the students, completing all the activities prescribed for the academic programmes, facilitating the students and staff for access to technology with prescribed ICT facilities, etc.
4. We are aware to perform all the administrative activities such as ensuring necessary Infrastructural facilities as prescribed and/or required, maintaining records of administration and activities, maintaining the accounts, facilitating programme information services, collecting the fee from the students and depositing to Dr.Babasaheb Ambedkar Open University within prescribed time duration, executing all the activities related to enrollment/admission process, facilitating the infrastructural facilities for organizing the examination, etc. Furthermore, we are aware that the students will be enrolled with Dr.Babasaheb Ambedkar Open University for its academic programmes and hence, Dr.Babasaheb Ambedkar Open University is authorized to cancel the enrollment or transfer such student to other study centre. We will strictly adhere to prescribed norms and formats of advertisement (applicable to all situations and purposes) of Dr.Babasaheb Ambedkar Open University We are aware about rules, regulations, guidelines, instructions, norms and standards prescribed for Government Scholarship Schemes and we shall abide by the same as notified at the moment and to be notified / declared from time to time by respective government authority.
5. We are aware that it is required to appoint Study Centre Head, Programme Coordinator, Counselors, and other administrative staff. We will ensure the

adherence as well as compliance to provision of various acts such as Labour Act, Employee Provident Fund Act, Professional Tax Act, etc.

6. We are aware that all the academic and administrative activities of the Study Centre should be planned and executed as per the norm and standards prescribed by the ODL Philosophy of Dr.Babasaheb Ambedkar Open University We are also aware that we need to equip our study centre with the ICT Based applications recommended by Dr.Babasaheb Ambedkar Open University to support this philosophy.
7. We, further declare that we will submit all the required and necessary information or statistics, in the manner and schedule as the Dr.Babasaheb Ambedkar Open University may decide. We are aware that of Dr.Babasaheb Ambedkar Open University has it own Assessment & Accreditation System to maintain the quality of academic programmes as per its own ODL Philosophy. And there is a procedure of continuous assessment of the study centre, of which the onsite visit/inspection by peer team. We are aware that such visit may be declared to us or not and in both the case, we are abide to cooperate, respond and submit all the required details and documentation to the visit team of Dr.Babasaheb Ambedkar Open University. Based on the report of visit/inspection, Dr.Babasaheb Ambedkar Open University is authorized to withdraw the approval of our study centre. As a part of Assessment and Accreditation Process, we are abide to procure and use the ICT based applications notified by Dr.Babasaheb Ambedkar Open University, software developed for supporting the process.
8. We shall be responsible for the acts of omission and commission on my part or on the part and Dr.Babasaheb Ambedkar Open University will not be liable / responsible towards any commitment(s) made by anyone at our Study Centre. And we will be solely responsible for all the legal consequence arouse due to any acts of omission and commission against the rules, regulations, guidelines, instructions, norms and standards of Dr.Babasaheb Ambedkar Open University, Distance Education Council and Other Apex or concerned Bodies/Authorities.

9. We are aware to maintain the discipline of students and staff at the study centre. We will be solely responsible for any discrepancy or commission of the acts against the prescribed rules, regulations, guidelines, instructions, norms and standards of mentioned above. We will ensure to avoid / not to convey any false / exaggerated / poor commitments to students and staff by any of the person (including staff) involved directly or indirectly in the activities of Study Centre. We will be solely responsible for any legal action and answerable to any element of the society for the discrepancy arouse due to any false / exaggerated / poor commitments. We are also aware that there will neither any role of Dr.Babasaheb Ambedkar Open University nor be answerable to any one in any of the situation mentioned in this point, rather withdrawal of approval to our study centre will be immediately executed by Dr.Babasaheb Ambedkar Open University.
10. We declare that the information and documentation provided by us during the submission of proposal for approval of study centre and during the frequent communication (oral/written) are true and valid. If found any discrepancy in the same, the Dr.Babasaheb Ambedkar Open University is authorized to cancel the approval to our study centre.

Date: ----/----/-----

Place: _____

1. Chairman/President:

Full Name: _____ Signature: _____

Seal: _____ (Organization's Seal)

2. Secretary:

Full Name: _____ Signature: _____

Seal: _____ (Organization's Seal)

3. Study Centre Head:

Full Name: _____ Signature: _____

Seal: _____ (Study Centre's Seal)

