**DETAILS REQUIRED FOR CENTRE Approval\_CAAF - PMKVY 2.0**

**Job roles/ Trades**

|  |
| --- |
| **1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****2.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

|  |  |  |
| --- | --- | --- |
|  | **Center Name**   |  |
|  | **Center Address** ( as per electricity bill/ Telephone bill) |  |
|  | **Center District** |  |
|  | **Center Constituency** |  |
|  | **Center Pin code** |  |
|  | **Center Total Carpet area** |  |
|  | **Centre Head Name / SPOC** |  |
|  | **Centre Centre Head /SPOC** **E mail ( Only Official email ids)** |  |
|  | **Centre Centre Head / SPOC contact No** |  |
|  | **Total No. of Computers available at Center** |  |

1. **Proximity of Centre to Public Transport System, please tick(ѵ) from below options:**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. 0-3 Km
 | 1. 3.1-5 Km
 | 1. 5.1-10 Km
 | 1. More than 10 Km
 |
|  |  |  |  |

1. **Name of Nearest Bus/Metro/Railway Station**

|  |
| --- |
|  |

1. **Building Status, please tick(ѵ) from below options:**

|  |  |  |
| --- | --- | --- |
| 1. Stand Alone Building
 | 1. Industrial/Commercial Building
 | 1. Educational Institute/Residential Building
 |
|  |  |  |

4. **Type of Construction of Building, please tick (ѵ) from the below options:**

|  |  |
| --- | --- |
| a) Pre-fabricated (already built) | b) Not pre-fabricated |
|  |  |

|  |  |
| --- | --- |
| 5- **Is the TC well plastered, colored distempered/whitewashed, please specify Yes/ No** |   |
| 6- **TC Walls/Roofs made of Tin sheets, please specify Yes/ No** |  |
| 7- **Centre Floor is cemented and furnished, please specify Yes/ No** |  |
| 8- **Centre Floor is tiled, please specify Yes/ No** |  |

9- **Front Face of the Building, please tick (ѵ) from the below options:**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. Glass and aluminium sliding window
 | 1. Glass Cover
 | 1. Reinforced Cement Concrete (RCC)
 | 1. Others
 |
|  |  |  |  |

|  |  |
| --- | --- |
| 10- **Approach Road of the Centre (please write the appx. Width ( in ft) of the Road approaching the Centre Entrance)** |  |

**Classroom Details**

|  |  |
| --- | --- |
| **11 - Total no. Number of Classrooms-** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class room details**  | **Class 1** | **Class 2** | **Class 3** | **Class …n** |
| Carpet Area (In Sq.Ft) |  |  |  |  |
| Adequate Power Backup (UPS/ GenSet/Inverter), please specify Yes/ No |  |  |  |  |
| Availabilty of any Type of Projector, please specify Yes/ No |  |  |  |  |
| Availability Of Air Conditioner, please specify Yes/ No |  |  |  |  |
| Availability of CCTV Camera with Recording Facility, please specify Yes/ No |  |  |  |  |
| Availability of Internet, please specify from below options:1. Speed of 1 MBPS and above
2. Speed of Less Than 1 MBPS &
3. Greater Than 512 KBPS
4. Speed of Less Than 512 KBPS
5. Internet not Available
 |  |  |  |  |
| Availability of Adequate Light in the Classroom, please specify Yes/ No |  |  |  |  |
| Availability of Exhaust Fan, please specify Yes/ No |  |  |  |  |
| Electrical Wires and Switchboard , please specify Yes/ No |  |  |  |  |
| Classroom Well Ventilated, please specify Yes/ No |  |  |  |  |
| Availability of Dustbin in the Classroom, please specify Yes/ No |  |  |  |  |
| Is the Classroom Clean and Hygienic**,** please specify Yes/ No |  |  |  |  |
| Contact of Fire Brigade, Ambulance , Hospital Emergency Numbers displayed in the Classroom, please specify Yes/ No |  |  |  |  |
| Remark(If any) |  |
|  |  |  |  |  |

**12. LAB Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Lab Details** | **IT/ Computer Lab** | **Lab 1- trade specific** | **Lab 2- trade Specifit** | **Lab ..n – trade specific** |
| Is the Lab Same as the Classroom, please specify Yes/ No |  |  |  |  |
| Lab Serial Number |  |  |  |  |
| Availability of Internet in lab |  |  |  |  |
| Availability of Internet, please specify from below options:1. Speed of 1 MBPS and above
2. Speed of Less Than 1 MBPS & Greater Than 512 KBPS
3. Speed of Less Than 512 KBPS
4. Internet not Available
 |  |  |  |  |
| Carpet Area (In Sq.Ft)  |  |  |  |  |
| Availability of Power Backup in this Lab in form of UPS/ GenSet/ Inverter, please specify Yes/ No |  |  |  |  |
| Lab used for which Job Roles | ……………. | …….. | ………….. | ……….. |
| Availability of CCTV Camera with Recording Facility, please specify Yes/ No |  |  |  |  |
| Availability of Adequate Light in the Lab, please specify Yes/ No |  |  |  |  |
| Availability of Exhaust Fan, please specify Yes/ No |  |  |  |  |
| Electrical Wires and Switchboard Secured, please specify Yes/ No |  |  |  |  |
| Lab Well Ventilated, please specify Yes/ No |  |  |  |  |
| Availability of Dustbin in the Lab, please specify Yes/ No |  |  |  |  |
| Is the Lab clean and hygienic, please specify Yes/ No |  |  |  |  |
| Contact of Fire Brigade, Ambulance , Hospital Emergency Numbers displayed in the Lab, please specify Yes/ No |  |  |  |  |
| Remarks(If any) |  |

**Give AREA in SQUARE FEET for all below rooms/Area-**

|  |  |  |
| --- | --- | --- |
| **Sn.** | **Area** |  **Size ( in ft)** |
| 13 | **Counselling Area** |  |
| 14 | **Reception Area** |  |
| 15 | **Library** |  |
| 16 | **Office Space (For Trainers and Staff)** |  |
| 17  | **Placement And Entrepreneurship Cell** |  |
| 18 | **Pantry** |  |
| 19 | **Male Wshroom** |  |
| 20 | **Female washroom** |  |
| 21 | **Playground if any** |  |
| 22 | **Parking space if any** |  |
| 23 | **Any outside area which is a part of the Centre** |  |

24. **Provide the details as per table for below mentioned staff**

Type of Support Staff, please specify from below options:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sn.** | **Designation** | **Name** | **Highest Qualification** | **Years of Experience** |
|  | Receptionist/ Front Office Coordinator |  |  |  |
|  | Placement Coordinator |  |  |  |
|  | Counsellors |  |  |  |
|  | Administration Officer |  |  |  |
|  | MIS Coordinator |  |  |  |
|  | Mobiliser |  |  |  |

25. **TRAINER DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sn.** | **Name of Trainer**  | **AADHAR Number** | **Mobile Number** | **Highest trade relevant Education** | **Years of Experience** | **Trade/ Job roles for** |
| Trainer 01 |  |  |  |  |  |  |
| Trainer 02 |  |  |  |  |  |  |
| Trainer 03 |  |  |  |  |  |  |
| Trainer 04 |  |  |  |  |  |  |
| Trainer 05 |  |  |  |  |  |  |
| ………… |  |  |  |  |  |  |
| Trainer n |  |  |  |  |  |  |