



ACHIEVERS CIRCLE PRIVATE LIMITED

[Under the Companies Act, 1956 (No.1 of 1956), Government of WB, India]

Corporate Identity No. U80901WB2014PTC201663

Corporate Address: 162, S.P. Mukherjee Road (Rashbehari Avenue), Kolkata- 700 026, W.B.

Website: www.achieverscircle.org; Email: drsrephd@gmail.com;

Contacts: (+91) 9830287574/9804172026/ 033-6450 6184

**[Member of Quality Council of India, New Delhi, Govt. of India under Higher /
Professional Institute-Education Scheme]**

FRANCHISEE APPLICATION FORM

1. Information about the organization:

a) Name of the organization (BLOCK LETTERS):

b) Full Postal Address with Pin Code:

c) Email, Website, Contact Nos:

**d) Organization Details (Use separate sheet & may be given in Annexure;
photocopy of all documents must be attached for proof with self-attested seal
from the Organization Head):**

i) Total Carpet Area (Sq. ft.):_____

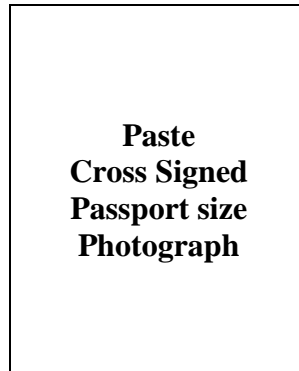
**ii) Organization Type (attach self attested photocopy with seal) i.e.
organization under SR Act, Pvt. Ltd., Partnership, Proprietorship
etc.:**_____

iii) Year of Establishment:_____

iv) Business/Work Experience:_____

- v) PAN Card No: _____
- vi) Bank Details: _____
- vii) Registration No.: _____
- viii) Premises Owned/Rented/Leased: _____
(Rent/Lease agreement should be minimum 5 years)
- ix) Photographs of external building & internal block/room each location: _____
- x) Other legal documents (if any): _____
- xi) Financial Status Details: _____

2. Information about the Organizational/Centre Head:



- a) Name (BLOCK LETTERS): _____
- b) Designation: _____
- c) Postal Address with Pin Code:

- d) Contact No's: _____
- e) Date of Birth: _____
- f) Email: _____
- g) Highest Educational Qualification (attach self attested photocopy):

- h) Nationality (Attach self attested photocopies of Nationality proof):

- i) PAN Card No (Attach self attested photocopy): _____
- j) Aadhaar Card No (Attach self attested photocopy): _____

k) Have you ever been arrested, prosecuted, kept under detention or bound down/ fined, convicted by the Court of Law for any offence or debarred/disqualified by any selection/examination committee or rusticated by any university or any other educational authority/institution? Is any case pending against you in any Court of Law, University or any other Educational Authority/Institution at the time of filling up of this form? (if required please use separate sheet & may be given in Annexure; Affidavit-Notary Public should be attached):

l) Total work experience (attach self attested photocopy): _____

m) Others, if any (may be given Annexure): _____

3. Information about the Non Teaching Staffs [Please use separate sheet & may be given in Annexure (attach self-attested full CV with photo, KYC Documents, Aadhaar Card, Experience Proof, Educational Qualification Proof etc.)] :

Sl. No.	Name	Designation	Highest Qualification	Total Work Experience	Date of Appointment	Status (Full/Part /Honorary)

4. Information about the Teaching Staffs [Please use separate sheet & may be given in Annexure (attach self-attested full CV with photo, KYC Documents, Aadhaar Card, Experiences Proof, Educational Qualification Proof etc.)]:

Sl. No.	Name	Designation	Highest Qualification	Total Approx Experiences	Date of Appointment	Status (Full/Part /Honorary)

5. Information about Library & Reading Room:

- a) Total Carpet Area (sq ft): _____
- b) Total Number of Books (attach purchase bill photocopy/gift items declaration): _____
- c) Total Number of Journals (attach purchase bill photocopy/gift items declaration): _____

6. Information about Laboratory (Please use separate sheet & may be given in Annexure):

Name of the Laboratory	Total Carpet Area (Sq. ft.)	Machineries/ Equipments/Apparatus (Please mention if still working or not working; also attach purchase bill photocopy/gift declaration)	Reagents & Chemicals List (if any) [Attach purchase bill photocopy]

7. List of Assets (Must be submitted in the following format & may be given in Annexure):

Particulars	Ref. No.	Numbers	Location	Date of Purchase	Status (Working/ Not Working)	Attached Purchase Bill

8. Number of Rooms & Carpet Area (may be given in Annexure):

Name of the Room/Hall	Total Carpet Area	Facilities (if any)
Front Office/ Reception		
Director Room		
Lecture Hall I		
Lecture Hall I		
Office Room		
Library Reading Room		
Laboratory Room		
Faculty Room		
Washroom (Gents)		
Washroom (Ladies)		
Others (specify please)		

9. Miscellaneous (if required may be given in Annexure):

- a) Drinking water facility: _____
- b) Power back up facility: _____
- c) Photocopy, print out, scan facility: _____
- d) Whiteboard, microphone system, sufficient light facility: _____
- e) HR Manual details with duly signed by Centre Head: _____
- f) Sufficient water flow: _____
- g) Classroom facilities: _____
- h) Professional Membership (if any): _____
- i) Others (if any): _____

10. References:

Full name of the person:	
Organisation Name:	
Contact No, Email ID:	
Communication Address:	
I know that the applicant since _____ years/months and s/he bears a good moral character. I recommended him/her for ACPL Franchisee.	Signature with Seal

11. Declaration by the Organizational Head & acceptance of all franchisee rules & regulations, terms & conditions of ACPL:

- a) I declare that, the above information provided by me is true and correct. Similarly, the documents submitted by me are true. I shall be solely responsible for the financial & legal liabilities arising in event of any false information and documents.
- b) I hereby declare that I applied for franchisee of ACPL without anybody's and/or any group's, society's, association's etc. influence & pressure. I understand that as per rules and regulations of ACPL, fees once paid are non-refundable in any circumstances except non-acceptance of application. I hereby undertake to inform ACPL about any changes in information, including change in addresses and phone nos. etc., and/or any other documents submitted by me in the Application Form.
- c) The franchisee approval/ provisional approval depends upon the ACPL authority & their decision will be treated as final. If any dispute/s arises then the jurisdiction of Kolkata High Court only will be deemed as final.
- d) If the franchisee application is not accepted, then 80% of the affiliation fees will be refundable within one month. If accepted, each year renewal fees of INR 10,000/- (Indian Rupees Ten thousand only) has to be paid. If renewal fees are not cleared then the franchisee affiliation will be provisionally rejected. If renewal fees are not cleared within the first six months of affiliation expiry date then the affiliation will be cancelled permanently & the ACPL authority may take any action against the organization. Yearly calculation will be based on date of approval as a franchisee of ACPL.
- e) ACPL is not interested to affiliate any centre without any type of infrastructure. The materials (glow sign/leaflet) for advertising & promotional purpose shall be supplied by the ACPL, the cost of which has to be borne by the franchisee organization. The admission register, prospectus, admission form etc. will be supplied by the ACPL, 50% of the cost of which has to be borne by the franchisee organization. The faculty shall be provided by the ACPL subject to availability & the full faculty cost has to be borne by the franchisee organization. If any renovation or decoration like partition or extra coloring is required for the center after acceptance as a franchisee of ACPL then after mutually deciding in writing, approved by the ACPL authority, the expenses shall be borne by the franchisee organization.
- f) Affiliation fees including service tax (one-time payment non-refundable; must be paid with Application Form; only A/CPayee Cheque in the name of "ACHIEVERS CIRCLE PRIVATE LIMITED" accepted):

Total Carpet Area (Square Feet)	Metro (INR)	City (INR)	Urban (INR)
500-750	15000/-	10000/-	5000/-
750-1500	20000/-	15000/-	10000/-
Above 1500	25000/-	20000/-	15000/-

- g) The self application (centre letter head with centre seal dully signed by organizational head) must be presented with this franchisee form mentioning in which category your centre will be interested to apply & all should be addressed to: The Chairman & Managing Director, Achievers' Circle Private Limited, 162, S.P.Mukherjee Road, Kolkata 700026, WB, India.

I/We do hereby accept the above terms & conditions (mentioned in the page 1 to 6) and agree to abide by the rules & norms of the ACPL and would like to accept the terms and conditions.

Centre Stamp/Seal

**Signature & Date
Organizational Head**

FOR ACPL USE ONLY

Application No:

Date of Receipt:

Inspection on: **by**

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**Franchisee Application Status (Approved/Rejected/Minor
revision required/Major revision required):**

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Payment Money Receipt No & Date:

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Authorized Signatory with Seal