

# MAHARISHI DYANAND EDUCATION GROUP



(A UNIT OF M DEGS & M DES, NEW DELHI)

(An ISO 9001 : 2008 Certified Organization)

Regd. By Govt. of NCT, New Delhi

Regd. By Govt. of India, New Delhi

Regd. By HRD (Dept. of Education), New Delhi

Visit us :- [www.mdeg.org](http://www.mdeg.org)

## Application Form for Franchise/ Study Centre

**Note:** (Kindly fill in English - BLOC)

Applicant Photo

Attested by Gazetted officer/

M.L.A. / M.P. or Self Attested

To,

SECRETARY

MAHARISHI DYANAND EDUCATION GROUP

NEW DELHI

SR,

I/ We have taken note of all the rules & regulation of the M DES & M DEGS I will abide by the rules in the future.

I/ We \_\_\_\_\_ am/ are presenting the application form for the establishment of a Franchise of Nursery Teachers Training (NTT)/ Primary Teachers Training (PTT)/ Nursery Primary Teachers Training (NPTT) / IGD Bombay Art / Computer Course.

Name of Applicant(s): \_\_\_\_\_ Designation: \_\_\_\_\_

Father's/ Husband's Name: \_\_\_\_\_

Name of Institute: \_\_\_\_\_

Correspondence Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Pin Code: \_\_\_\_\_ Contact No: \_\_\_\_\_ e-mail

ID: \_\_\_\_\_

Name of Franchise / Study Centre: \_\_\_\_\_

**DECLARATION BY THE APPLICANT**

I hereby declare that I have read & considered the condition of the eligibility for the study centre & I fulfill the condition. I have furnished about the necessary information in this record. In the event of any information found incorrect or misleading my candidature shall be liable to cancellation any and I shall not be entitled to get refund any amount paid by me to the Institute. In the event of any dispute it shall be resolved through the mediation of the chairman or a committee constituted under the constitution/ Arbitration Act and its decision shall be binding on all concerned & I will liable the expenses.

Date: \_\_\_\_\_

signature of applicant

Encl.: 1. Copy of Photo I.D. Signature of Applicant

**DECLARATION**

Before The Chairman/ Secretary  
**M AHARISHI DYANAND EDUCATION GROUP**

I/ Shri.....Father's Name.....

Age.....Resident of.....Distt.....Pin.....

Phone No.....Office.....E-mail Id.....

**Declare as Under:**

1. Our Organization will work as an FRANCHISER of M DEG NEW DELHI.
2. All the Admission/ Examination documents collected from the organization will be kept safely/ confidentially be me & its will be my responsibility for its timely distribution in the centre.
3. That our institute will work according to the rules & regulation of the organization & I agreed with all the rules & regulation of the organization.
4. In no circumstances the enrollment number or exam result will be asked for in the even of the does not being paid to the M.D.E.G. NEW DELHI.
6. That I have read and understand the rules & regulation of the Organization and only after complete satisfaction this declaration is being made which when necessary can be made use of for legal purpose. In the event of an dispute will be settled by the committee appointed by the M DEG/ MAHARISHI DAYANAND PROFESSIONAL TRAINING INSTITUTE/ MAHARISHI DYANAND EDUCATION SOCIETY, NEW DELHI, & MAHARISHI DYANAND EDUCATION GROUP SOCIETY under the provisions of the Indian Attribution Act 1940 and its decision will be binding on all concerned & I/ We will Liable to all the expense.

Therefore, I.....declare that time the information furnished in the form for Establishment of centre are true to the best of my knowledge and belief and will remain in force and binding on me and my successor for the Center's association with the organization.

Place:.....

Signature of the declarant