



ENROLLMENT FORM

Name of the school

Location of the school

 Rural Urban Semi Urban

District

Type of the school

 Govt. Aided Unaided

Nature of the school

 Boys Girls Co-Ed

School level

 Primary Secondary Higher Secondary

Medium of Instruction

Name of the Board

 State Board CBSE ICSE International

Address
for communication

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.....

.....

Phone / Mobile number
of the school

email

web

Name of the Principal / Head
of the school

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Mobile number

.....

email

.....

Does your school have a computer Lab ? If yes

No. of Computers available for the use

Mention Configuration of the Computers :.....

Details of teaching staff for SUITS Programme

S.No.	Name	Educational Qualifications	Email	Mobile No.
1				
2				
3				
4				
5				

Details of Students enrolled

S.No.	Programme (A)	Std.	No. of Boys	No. of Girls	Total
1	Certificate in Computing Skills	V			
2	Certificate in Office Automation	VI			
3	Certificate in Programming Skills	VII			
4	Certificate in Programming with C	VIII			
5	Certificate in Python Programming	IX			
6	Certificate in Artificial Intelligence & Reality	IX			
	Grant Total				

S.No.	Programme (B)	Std.	No. of Boys	No. of Girls	Total
1	Certificate in Graphics Design	VII			
2	Certificate in Web Design	VIII			
3	Certificate in Mobile App & Web Development	IX			
	Grant Total				

I hereby declare that all the particulars given above are correct and I agree to abide by the rules and regulations of the IECD, Bharathidasan University for the implementation of SUITS.

Date :

Place :

Signature of the Correspondent /
Principal / Head with Seal

Official Use		
Whether the centre is approved : Yes / No		Tie-up organisation :
Verified by	Co-ordinator	Director