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**CHARTER ASSESSMENT APPLICATION**

**UNIVERSITY INDUSTRY INTER-LINKAGE CENTRE**

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| Enrolment No. | :- | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Examination | :- | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Name of Examinee | :- | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Charter Name | :- | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| **ASSESSMENT APPLIED FOR** | | |
| **S.No.** | **Module Code** | **Module Name** |
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**DECLARATION BY THE APPLICANT**

I hereby declare that I have read and understood the relevant rules & eligibility conditions for admitting into the privilege of Charter as prescribed by the University Industry Inter Linkage Centre (UILC) in accordance with National Skill Qualification Framework as notified by the Govt. of India. I am fully aware that the requirements of training/ internship/ work experience are mandatory for the grant of this charter privilege in addition to assessments conducted by UILC. I further declare that if required I shall submit any other document(s) as may be directed by the UILC in future. I also agree that in case any information furnished by me is found to be incorrect/ misleading/ counterfeited OR non-compliance of UILC regulations OR violation of discipline, the UILC is empowered to reject the claim for admitting into the privilege of Charter, debar me from attending the assessments, taking any appropriate action including suitable legal action and forfeiture of fee deposited.

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Place & Date: Signature of the Applicant

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| ***(For Office Use Only)*** | | | |
| Fee Details: | Total No. of Modules to be appeared  Assessment Fee Per Module  Late Fee (if any)  Total Assessment Fee | :-  :-  :-  :- | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Instrument Details: | DD No.: - \_\_\_\_\_\_\_\_\_\_\_ Date: - \_\_/\_\_/\_\_\_\_\_ Issuing Bank: -\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |