



**Management & Entrepreneurship and Professional Skills Council
14 Management House, Institutional Area, Lodhi Road, New Delhi- 110003**

Industry Partnership Form for Organisations and Institutions

Details of the Organisation applying for Partnership

Name of the Organization: _____

Name of the CEO/COO/MD/Entrepreneur/Partner/Proprietor: _____

Address: _____

City: _____ Pin code: _____

Telephone no (Prefix STD/ISD Code): _____ Mobile No: _____

Fax (Prefix STD/ISD Code): _____ Email Address: _____

Ownership Pattern (Please tick as applicable): Under Central Government/ State Government/ Public Limited/ Private Ltd. /Autonomous/ Trust/ Society/ Proprietary/ Partnership/Any other

Nature of Operation (Please select as applicable): Manufacturing/Service/Others

Give a brief detail of your Organisation in 150 words. (You may attach copy of Company Brochure, Catalogue or a Presentation)

Annual Turnover (in Lakhs): _____

Net Profit (in Lakhs p.a.) _____

Details of Principal representatives for liaison with MEPSC

I. Name: _____	I. Name: _____
ii. Designation: _____	ii. Designation: _____
iii. Division: _____	iii. Division: _____
iv. Telephone no (Prefix STD/ISD Code): _____	iv. Telephone no (Prefix STD/ISD Code): _____
v. Mobile No: _____	v. Mobile No: _____
vi. Address: _____	vi. Address: _____
vii. City: _____	vii. City: _____
viii. Pin Code: _____	viii. Pin Code: _____

How does your Organisation expect to benefit from MEPSC Partnership?

Is your Organisation/Institution contributing towards any activity in CSR? (Yes/No)

Has your organisation/Institution done any work in Skilling under CSR?
(Please annex the details and mention the Annexure number here)

Please describe the areas where your organization is facing/has faced challenges in Training/Skilling employees. Describe the steps taken by your organization in handling the challenge.
(Please annex the details and mention the Annexure number here)

List of Documents required to be enclosed with the Industry Partnership Form.

(please tick the attached documents)

- a) Latest Annual Report & Balance Sheet
- b) Corporate Profile
- c) Copy of Registration Certificate
- d) DD/Cheque in favour of Management & Entrepreneurship & Professional Skills Council or copy of transaction ID/proof of payment in case of NEFT/RTGS/Bank Transfer.
- e) Duly signed Declaration Letter (Refer Annexure I)

PAYMENT OPTIONS: Please select your payment method: Bank Transfer/Cheque or DD

BANK TRANSFER

(Kindly send us proof of payment at- Management & Entrepreneurship & Professional Skills Council, 14 Management House, Institutional Area, Lodhi Road, New Delhi-110003 or email us the Payment proof at info@mepsc.in)

Account Name : Management & Entrepreneurship & Professional Skills Council

Bank Name: Kotak Mahindra Bank	Account No: 7611757927	Branch: Malviya Nagar
MICR Code: 110485021	IFSC Code: KKBK0000194	Address: C-71, Malviya Nagar, New Delhi – 110 017

CHEQUE / DEMAND DRAFT:

I enclose a cheque for INR _____ payable to Management & Entrepreneurship & Professional Skills Council, New Delhi

(Kindly send us the Cheque/Demand Draft alongwith Industry Partnership Form and other relevant documents at - Management & Entrepreneurship & Professional Skills Council , 14 Management House, Institutional Area, Lodhi Road, New Delhi-110003 & also email us the scanned copy of the same at info@mepsc.in)

We declare that the statements made herein are correct to best of our knowledge & belief, and we agree to be governed by the rules and regulations of Management & Entrepreneurship and Professional Skills Council as they now exist and as they may hereafter be amended. We attach herewith the copy of documents required along with the Industry Partnership Form & Declaration letter (Enclosed as Annexure- I).

For and on behalf of :

Company Seal

Date:

Place:

Signature

Name (in Block Letters):

FOR OFFICIAL USE

Date of Industry Partnership Approval by the MEPSC Executive Board: _____

Industry Partnership Number: _____

Annexure I
(on letterhead of the Company)

DECLARATION

Chief Executive Officer
Management & Entrepreneurship and
Professional Skills Council (MEPSC)
Management House, 14 Institutional Area, Lodhi Road,
New Delhi- 110003

Dear Sir/Madam,

I/We wish to apply for MEPSC Industry Partnership. We are submitting the details of our organization along with relevant supporting documents.

I/We understand that our Partnership with MEPSC is subject to approval of this application by the MEPSC Executive Board.

I/We understand and accept that in the case of evidence being found of any unethical activity, MEPSC reserves the right to unconditionally terminate this Partnership.

Name: (in Block Letters)

Signature:

Designation:

Email:

Contact Number: