

**FORM-I**

**APPLICATION FOR GRANT OF RECOGNITION AS MINORITY  
EDUCATIONAL INSTITUTION**

**(For existing institution and renewal of recognition)**

Name and address of Institution Date of setting up of the Institution Phone No. Fax No. E-mail Address	
Name of the educational agency managing the institution	
Minority community to which the institution belongs	
Year of establishment of Society/Agency Date of Registration Place of registration (attach a copy of certificate)	
Govt. orders under which the institution has been permitted to be established (attach a copy)	
Number and percentage of students belonging to the minority concerned in each course (Documents of particulars for the last two years to be enclosed)	
Name other minority institutions run by the educational agency	

**DECLARATION**

I, ..... hereby declare that the information and particulars furnished above are based on the records of the educational agency and are true to the best of my knowledge and belief. No information relevant for establishment of the minority educational institution has been concealed.

Name of applicant  
and designation  
(Stamp to be affixed)

