

## **FORM B**

#### **APPLICATION FOR AMENDMENT**

(Addition/ Deletion)

This form is used to amend (add/ delete) any information already submitted in the Application of Affiliation Form 'A' Note:

- Add information only where amendment is required (a)
- Answer to each question should be clear and definite (b)
- (c) Please, attach additional sheet(s) where required

1.	Name of the Institute	
2.	PIST Registration Number	
3.	Change of Postal Address of the Institution	
4.	Change of Telephone, Cell Numbers & Email of the Institution	
5.	Change of Total Land/Area in hold of the Institution	
6.	Addition of Branches/Campuses of the Institute/College	
7.	Change of Head of the Institute with Name, CV, Cell Number & Email	
8.	Addition of Academic/ Skills/ Fields to be persuade by the Institution	
9.	Details of added schemes of studies/ Skills to be persuaded by the Institution	
10.	Deletion of Academic Fields / Skills/ to be persuade by the Institution	



13.	Current Number of students on roll Gender wise	
14.	Change of Institution running time (Morning/ Evening)	
15.	Change of building ownership or location status (owned by the Institution or acquired on rent) if on rent please provide lease agreement	
16.	Change in physical up-gradation / expansion of the institution.	
17.	Change in scholarship / free ships policy, if yes, please provide details	
11.	Deleted schemes of studies/ Skills by the Institution (List Names)	



#### **CHANGE IN BOOKS IN LIBRARY**

Description	Numbers of Books
Hard Copies	
e-Books	

### **CHANGED LAYOUT PLAN OF THE BUILDING**

1.	Principal Office with Dimension
2.	Administration Office with Dimension
3.	Numbers of Class Rooms with Dimension
4.	Girls Common Room with Dimension
5.	Faculty Room with dimension
6.	Wash Rooms with dimension
7.	Reception with Dimension
8.	Laboratories with dimension

### **CHANGE IN FURNITURE / FIXTURE**

1.	No. of Class Room Chairs	
2.	No. of White Boards	
3.	No. of Notice Boards	



4.	No. of Ceiling Fans	
5.	No. of Exhaust Fans	
6.	No. of Air Conditioners	
7.	No. of Steel / Wooden Almirahs	
8.	No. of Office Tables	
9.	No. of Office Chairs/ Sofa Seats	
10.	No. of Computers if any	
11.	No. of Computer Chairs	
12.	No. of Computer Tables	
13.	No. Rostrums	
14.	No. Projectors	
15.	No. Internet Connections	
16.	No. Fire Fighting Equipment	
17.	No. Medical Aid Box	

#### **CURRENT STAFF PROFILES**

Please, write down the names of staff with their academic/professional qualifications and experience.





## **REPORT BY RE-VISITATION TEAM** (If Required)

Signature Member 1	
Signature Member-1	
Signature Member-2 Signature COE	



Signature Director PIST	
Approved by Chairman PIST	