



E- INFORMANT SERVICES

Accreditation Form for Training Center Digital Literacy Mission

State :			
District :			
Block :			
Panchayat :			
Village :			
Training Centre Name:			
Email :			
Contact No. :		Phone No.:	
Address :			
No of computer at Centre :			
Internet Connectivity:	Broadband <input type="checkbox"/>	Dialup <input type="checkbox"/>	2G/3G <input type="checkbox"/> Dongle <input type="checkbox"/>
Power backup at Centre :			
Other IT Infrastructure at Centre :			
Centre Area in Square Feet/MT's :			
Name of the Centre Manager :			
Qualification :		Center	
Phone No.:		Picture	
Fax No.:			
Bank Name :			A/c No.
Branch Name :			IFSC
Pan Detail :			Adhar

I hereby declare the foregoing information is correct and complete to the best of my knowledge and belief...

Date/...../.....

Place.....

Authorized Signature