NATIONAL COUNCIL FOR TEACHER EDUCATION

Form of Application for grant of Recognition of Teacher Education Institutions / Permission to start a new course or increase in intake (other than Open and Distance Learning System.)

1.	<u>General Particulars / Information</u>
1.1	Name of the Institution :StAloysius College; Jabalpur
1.2	Postal Address in full :PentiNaka,S.adar,J.abalpur482001 (including PIN code)
1.3	Telephone No. / Fax / E mail. :(07.61) - 2620738,(07.61) - 2629655 - Fax
	E-Mail-davisgeorge@rediffmail.com
1.4	Nearest Railway Station with distance in Kms. :JABALPUR(1Km)
1.5	Nearest town with distance in Km. If located in rural area :
1.6	Name of the Programme. : Becholor of Education (B.Ed.)
1.7	No. of units / intake proposed (indicate whether 100 (One Hundred)
	it is a new programme or for an additional intake in a recognized programme) 100 (One Hundred) 100 (One Hundred) 100 intake in a recognized programme) 100 intake in a recognized programme)

1.8	Academic year (indicating the month):
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1.9	Name of the affiliating / examining body :RaniDurgavati.University.,JBP.

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