

FORMAT-1

No Objection Certificate from the State Government/ UT

The <Name of the Trust/Society/Company> vide its Executive meeting held on at vide item no.

have passed a resolution for the

- i. Institution applied for Closure of the Institution for starting of a new Technical Institution in the same premises in the same year
- ii. Change of Site/ Location of the Institution from <Name of the Institution>at<address>, (Old) to<Name of the Institution>at<address>, (new)
- iii. Conversion of Women's Institutes into Co-ed Institution / Co-ed Institution Women's Institution
- iv. Conversion of Diploma Level into Degree Level/ Degree Level into Diploma Level
- v. Starting of new Programme/ Level, Programme<Course1... (Intake)> in the Institution
- vi. Closure of the Institution
- vii. Change the Name of the Trust/ Society/ Company from <Name of the present Trust/ Society/ Company> at <address> to <Name of the new Trust/ Society/ Company > at<address>
<Name of the Institution>at<address>, Vide application ref. No Date: made by the Trust/Society/
Company Name Address as at

This is to confirm that the <State Government/UT> has no objection for the Institution applied for

- i. Institution for starting of a new Technical Institution in the same premises in the same year
- ii. Change of Site/ Location of the Institution from <Name of the Institution>at<address>, (Old) to<Name of the Institution>at<address>, (new)
- iii. Conversion of Women's Institutes into Co-ed Institution / Co-ed Institution Women's Institution
- iv. Conversion of Diploma Level into Degree Level/Degree Level into Diploma Level
- v. Starting of new Programme/ Level, Programme <Course1... (Intake)> in the Institution
- vi. Closure of the Institution
- vii. Change the Name of the Trust/ Society/ Company from <Name of the present Trust/ Society/ Company> at <address> to <Name of the new Trust/ Society/ Company > at<address>
<Name of the Institution> at <address>.

Liabilities, if any, on this count shall be the sole responsibility of the Applicant of the Trust/ Society/ Company and shall be settled as per the rules and Regulations as applicable.

Authorized Signatory

<State Government/ UT>

NOTE: Formats given by the Institutions reflecting the content of the concerned Format shall be accepted.

*Strike off whichever is not applicable.