

INSTITUTIONAL GEOGRAPHIC INFORMATION SYSTEM (GIS) DATA CAPTURE FORMAT (DCF)

GIS Application Reference Number

Name of Institution

Name of Society/Trust/Company

Management Category

Institution Category

Whether the Institute is a Composite Institution

Whether the Institute is a Minority Institute

Address (with Plot No./Khasra No.)

Name of Village

Tehsil/Division

State/Union Territory

District

Pincode

Mobile Number

Landline Telephone Number

Latitudinal Position of Institute Longitudinal Position of Institute

Jurisdiction Region

5-Mail ID

Website Address

3046111

SRI MAHAVEER INSTITUTE OF LEARNING AND

EDUCATION

SRI MAHAVEER FOUNDATION

Private

Co-Education

Yes

No

PLOT NO. 2, KHASRA NO. 227 STATION ROAD

BHUA

ORAL

Uttar Pradesh

Jalaun

285001

9839774354

05162205070

25.941052

79.355506

North Regional Committee

amitiips@rediffmail.com

http://www.smile.edu.in

Details on Courses Recognised Till Date

Application ID

Name of Course

No. of Units

Date of Recognition **Recognition Order**

Name of Affiliating

University

NRCAPP/4152

B.Ed

2

2014-3-5

74510

No

BUNDELKHAND UNIVERSITY

JHANSI

The above provided information pertaining to my Institution is true to the best of my knowledge. For any deviation and false information, myself and my Institution/Trust/Society/Company would be held responsible, and NCTE would be at liberty to take necessary action against my Institution/Trust under relevant provisions of NCTE Act/Rule/Regulations.

Any Other Information	
Name of the Authorised Person	AMIT AGRAWAL
Designation of the Authorised Person	MANAGER
Mobile Number of the Authorised Person	9839774354
Signature of Authorized Person along with Institute Round Seal	Joseph Lund Agnacol