




# स्वामी विवेकानन्द एजुकेशन ग्रुप

A Unit of  
**SWAMI VIVEKANAND EDUCATION & WELFARE SOCIETY**

Reg. By Govt. of NCT Delhi, Govt. of India (Regd. No.: S-1790) & C.R. Act, 1957,  
Affiliation with : Indian Council of Yoga & Naturopathy New Delhi  
An ISO: 9001:2015 Certified Organization  
A member of QCI (Quality Council of India) New Delhi,  
Reg. with: Ministry of Micro, Small & Medium Enterprises, Govt. of India



<b>COLLEGE NAME</b>	MANAV VIKASH YOG & NATUROPATHY SANSTHAN	<b>INSTITUTE/COLLEGE ADDRESS</b>	JILA UDYOG KENDRA SHASTRI NAGAR WARD NO 19 MAHARAJGANJ	
<b>TRUST/SOCIETY NEME</b>		<b>TRUST/SOCIETY ADDRESS</b>		
<b>TRUST/SOCIETY OWNER NAME</b>		<b>INSTITUTE/COLLEGE OWNER NAME</b>	PRAKASH SINGH	P. Singh
<b>DATE OF BIRTH</b>	03/11/1994	<b>FATHER NAME</b>	PRAHALAD SINGH	
<b>OWNER AGE</b>	28	<b>OWNER ADDRESS</b>	SHASTRI NAGAR WARD NO 19 MAHARAJGANJ	
<b>PHONE/MOB.NO.</b>	7398986675	<b>STATE</b>	UTTAR PRADESH	
<b>CITY/DISTRICT</b>	MAHARAJGANJ	<b>PIN CODE</b>	273303	
<b>EMAIL ID</b>	MANAVVIKASHSANSTHAN1988@GMAIL.CO	<b>INSTITUTE CATEGORY</b>	RURAL	
<b>TOTAL CLASS ROOMS</b>	5	<b>TUTORIAL ROOMS</b>	2	
<b>HOW MANY COMPUTERS</b>	15	<b>DEPARTMENTS/PROGRAMS</b>	YOGA , SOLAR ENERGY , COMPUTER , FASHION DESIGNING , NTT/PT , IGD BOMBAY ART , PARAMEDICAL PROGRAMS , VOCATIONAL COURSE PROGRAM , MEDIA , DANCE , ACTING AND MODELLING , GYM	

## Declaration

Before The Chairman/Secretary

Swami Vivekanand Education Group

I/Shri **Prakash Singh** Father's Name **Prahalad Singh**

Age **28** Resident of **Jila Udyog Kendra Shastri Nagar Ward No 19 Maharajganj**

Distt **MAHARAJGANJ** Pin **273303** Phone No. **7398986675**

## Declare as Under:

1. Our Institute will work as an Authorized study centre of SVEG/SVYS./SVCMS, New Delhi.
2. All the Admission/ Examination documents collected from the organization will be kept safely/ confidentially by me & its will be my responsibility for its timely distribution in the centre.
3. That our institute will work according to the rules & regulation of the organization & I agree with all the rules & regulation of the organization.
4. In no circumstances the enrolment number or exam result will be asked for in the even of the does n ot being paid to the SVEG/SVYS./SVCCS, New Delhi.
5. In any case I will not received Examination Fees in cash from students and examination Fees will be excepted by Banker's Cheque in favour of "Swami Vivekanand Education and welfare Society
6. All The Courses Run By Swami Vivekanand Education Group and Valid For Self Employment.

That I/We have read and understood the rules & regulation of the Organization and only after complete Satisfaction, this declaration is being made, which may be used for legal purposes whenever required. In the event of an dispute will be settled by the committee appointed by the Swami Vivekanand Education Group under the provisions of the Indian Attribution Act 1940 and Swami Vivekanand Education Group under the provisions of the Indian Attribution Act 1940 and its decision will be binding on all concerned & I/ We will Liable to all the expense.

Therefore, I/We **Prakash Singh** declare that time the information Furnished in the form for Establishment of centre are true to the best of my knowledge and belief and will remain in force and binding on me and my successor for the Center's association with the organization.

**Date:-**

**(Signature of the declarant in full)**

## Declaration

On behalf of the educational agency managing **Prakash Singh** Son/Daugther of **Prahalad Singh** do hereby declare that the particulars furnished above are correct to the best of

my knowledge and belief and that I am prepared to undergo any punishment imposed on me if any of the particulars furnished are found to be false and misleading. I also further declare that I shall abide by the conditions rules and regulative measures imposed by the SVEWS/SVEG/SVCCS/ from time to time for granting permission/affiliation to establish and run this institution.

Place: .....

(Signature of Centre's Head)

Date: .....