



APPLICATION FORM FOR AFFILIATION WITH

# MEDIA & ENTERTAINMENT SKILLS COUNCIL

AS TRAINING PARTNER

## **GENERAL INSTRUCTIONS**

- 1.** The affiliation is open only for company-owned training centres/ facilities.
- 2.** The affiliation would hold for a particular centre only.
- 3.** Along with the application form, the applicant needs to send a demand draft of Rs. 95,000/- for NSDC partners & Government institutions and 110,000/- for non NSDC partners in favour of Media & Entertainment Skills Council towards the Application and Due Diligence fee. This fee is non-refundable. (Please refer Appendix –B on page number 23 of this document)
- 4.** Once affiliation is granted and the same communicated to the applicant, all the other relevant and applicable fees need to be deposited by the VTP through demand draft.
- 5.** Separate due-diligence would be done for each of the centre applied for by the VTP
- 6.** Copies of all the relevant documents should be sent along with the application form.
- 7.** For each of the job roles being applied for, the relevant infrastructure, training process and trainer details are provided separately.
- 8.** The Council (MESC) reserves the final right to grant affiliation.
- 9.** The decision of MESC (Media & Entertainment Skills Council) would be final and no queries would be entertained in the matter.
- 10.** The filled-in application form should be sent at the following address
- 11.** Training Partners already affiliated to National Skills Development Corporation may submit the application form and a demand draft of Rs. 5,000/- in favour of Media & Entertainment Skills Council towards the Application Fee. This fee is non-refundable.
- 12.** In addition to point no 11. NSDC affiliated Training Partners may also submit NSDC Affiliation Certificate to MESC along with all the documents as submitted and filed with NSDC.

To,  
The Secretary  
Media & Entertainment Skills Council,  
C/O FICCI Building, Federation House  
1, Tansen Marg, New Delhi - 110001

APPLICATION FOR AFFILIATING FOR THE FOLLOWING JOB ROLES (AS PER QUALIFICATION PACKS):

S. No.	Qualification Pack	NSQF Level
1.		
2.		
3.		
4.		
5.		

(Add more columns, if required)

**SECTION 1: INSTITUTION AND MANAGEMENT PROFILE**

1. Name of the Institution:

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2. Whether NSDC funded :

Yes

No

If Yes, provide details

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3. Name(s) of the Director(s):

Salutation	Full Name

**4. Contact Details - Institution:**

Postal Address					
City		State		Pin Code	
Phone		City Code		Mobile	
E-Mail			Website URL		

**5. Other Details - Institution:**

Year of Establishment (DD/MM/YY) \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**6. Prior Exposure of the Institution in Skill Development Space**

\_\_\_\_\_

\_\_\_\_\_

**7. Medium of instructions in Institute:**

English       Hindi       Any Other, Please specify \_\_\_\_\_

**8. Does the Institute have branches?**

Yes       No

(If Yes, attach the list of Branches as Enclosure 1)

**9. PAN No.**

**TAN No.**

(Attach photocopy of the PAN card and Last IT Return as Enclosure 2)

**10. Turnover of the Institute(In Lakhs)**

(Attach Audited Balance Sheet of Last 3 years as Enclosure 3)

**11. Is the Institute Recognized with any Bodies**

Yes

No

If Yes, Please mention the following: (Attach Recognition certificate as Enclosure 4)

a. Name of the Body with which recognized

\_\_\_\_\_

b. Recognition Number

\_\_\_\_\_

c. Year of Recognition

\_\_\_\_\_

d. Validity of Recognition

\_\_\_\_\_

**12. Is the Institute Affiliated with any Regulatory Body?**

Yes

No

If Yes, Please mention the following: (Attach Recognition certificate as Enclosure 5)

a. Name of the Regulatory Body with which affiliated

\_\_\_\_\_

b. Affiliation Number

\_\_\_\_\_

c. Year of Affiliation

\_\_\_\_\_

d. Validity of Affiliation

\_\_\_\_\_

**13. Educational Qualifications and Experience of the Director/s and the Management Team members**

Name Of Director or Management Team	Educational Qualifications	Overall Work Exp. (In Years)	Prior Exp. (In Skills Training Space)	Key Achievements - Skills Development

**14. Details of the Operations Head and the Affiliation Co-ordinator of the VTP**

Name Of Operations Head & Affiliation Coordinator	Educational Qualifications	Overall Work Exp. (In Years)	Prior Exp. (In Skills Training Space)	Key Achievements - Skills Development

**15. Contact Details of the Directors/ Management Team/ Operations Head/ Affiliation Coordinator**

Name With Salutation	Contact Address With Pin-Code	Contact Numbers Landline & Mobile	E-Mail ID's

**SECTION 2: QUALITY ASPECTS IN INSTITUTION GOVERNANCE**

**16. Does your Institution have a "Mission Statement"?**  Yes  No

If Yes, please write the Mission Statement in the space provided below:

17. Does your Institution have as “Operations Manual”?

Yes

No

18. Please certify if your “Operational Manual” cover the aspects mentioned below in the table. At the time of affiliation assessment, the Operations Manual will have to be presented for Physical Verification.

Aspect	Yes/No	Remarks
Background of the Institution		
Organization Structure		
Details of other affiliations, if applicable		
Industry Linkages		
Profile of Senior & Middle Management		
Profile of Trainers		
Details of Infrastructure, Workshop, Store etc.		
Process of Internal Evaluation		
Placement Cell details and its Placement Tracks		
Courses Offered		

19. In the space provided below, provide the financial resources which shall be capable of sustaining a sound vocational educational program consistent with its stated mission and objectives.

20. Provide the list of all statutory and regulatory compliances followed by the Institution.

### SECTION 3: TRAINING OPERATIONS – PROCESSES

21. Details of documented process for management of Human Resources. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.

Aspect	Yes/No	Remarks
Recruitment guidelines and criteria based on required competencies		
Process of reviews to identify competency gaps vis-à-vis requirement in the in-house talent		
Training and professional development plan and processes		
Maintaining records of qualifications and experience		
Process of motivation and enhancement of self-esteem amongst the staff		
SSC specific add-ons		

#### 22. Details of the Teaching Staff

S. No.	Name	Designation	Degree Diploma	Training Certificate	Industry Experience	Instruction Experience	Regular or Visiting
1							
2							
3							
4							
5							

23. Have the Trainers undergone any specialized training?  
(If Yes, attach the Details of the training as Enclosure 6)

Yes

No

#### 24. Administrative Support Staff

S. No.	Staff	Permanent	Temporary/Part-time	Total
1	Office Manager			
2	Office Staff			
3	Lab Attendants			
4	Accountant			
5	Support Staff			
6.	Others			

**25. Details of the Curriculum of the all the courses offered. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Process of adoption and/or development of curriculum on the basis of QP and NOS developed by the SSC		
Review process to gauge the effectiveness of the curriculum developed		
Clear demarcation of time to theory and practical as per the criteria set by regulatory bodies		
Pedagogy inclusive of time schedule and lesson plan		
Process of SME engagement in curriculum design and development		
Review process for approval of curriculum from the SSC		
SSC specific		

**26. Details of the Courseware of all the courses offered. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Process of adoption and/or development of courseware on the basis of QP and NOS based curriculum approved by SSC		
Existence of Facilitators Guide		
Existence of Trainer Guide		
Existence of Participant Manuals		
Existence of Assessment Guides		
Existence of participant feedback forms		
Existence of Training Delivery Plans		
Review process to gauge the effectiveness of the courseware developed		
Process of SME engagement in courseware design and development		
Review process for approval of courseware by the SSC		
SSC specific		

**27. Details of the Teaching Process for the courses offered. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Time table		
Delivery plan		



Monitoring and evaluation process of students – continuous assessments, tests, examination etc.		
Management of student evaluation records		
Lab/ workshop exposure and its linkage to theoretical delivery		
Industry visits		
SSC specific		

**28. Details of Training Methodology. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Documentation process of training methodology		
Existence of training aids		
SSC Specific		

**29. Details of Methodology adopted for Continuous Evaluation. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Documentation process of Continuous Evaluation		
Documented process on student monitoring on learning		
SSC specific		

**30. Details of Methodology adopted for Industrial Interface. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Documentation process of engagement of experts from the industry		
Documented process on integration of real life problems from the industry and exposing students sample solutions		
SSC Specific		

**31. Details of Methodology adopted for Student Development. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Documented process of imparting soft skills training		
Documented process of providing guidance to students on placements		
Documented process on OJT/ Placement facilitation		
SSC Specific		

**32. Details on Student Admissions. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Printed Brochure/ Prospectus		
Documented Policy and Procedures for Admissions		
Concessions Policy		
Process of keeping the Safe Custody of Student Documents		
Student Agreement with the Institution at the time of Admission		
SSC Specific		

**33. Provide the availability of aspects related to the Learning Environment:**

Aspect	Yes/No	Remarks
Are the classroom illumination levels sufficient		
Are the classroom ventilated enough		
Do the classroom and rest of the centre maintain the required cleanliness		
Do the classroom and rest of the centre weather protected		
SSC specific		

**34. Library details**

a. Total number of Books related to the trade:

Technical

Non-Technical

b. Number of Magazine

c. Number of Dailies (Newspapers)

**35. Provide the availability of aspects related to the Infrastructure:**

Aspect	Details	Remarks
Building Own/Rented/ On Lease		
Area of Institute Premises		
Size of Classrooms		
Size of Labs		
Size of Workshops		
Number of Classrooms		
Number of Labs		
Number of Workshops		
Safe Drinking Water (Yes/No)		
Power Backup (Yes/No)		
Separate Toilet for Boys and Girls (Yes/No)		
Provision of transport facility, if applicable (Yes/No)		
SSC Specific		

**36. Ages of Critical Equipment that are more extensively used for Trade Training in the Workshop**

S. No.	Trade	Facilities	Number	Avg. Age in No. of Years	Remarks

**42. Details on Health and Safety of the learners. Certify the existence of the aspects listed below and will have to be physically produced to the affiliation assessors.**

Aspect	Yes/No	Remarks
Documented process of staff training on crisis handling		
Availability of equipment required for covering indoor and outdoor emergencies		
Documented process on providing training on the equipment on indoor and outdoor emergencies		
Availability of equipment required for fire safety		
Documented process on providing training on the fire safety equipment		
Health policy including collection of required medical record of staff and students		
Compliance to the regulatory norms related to health and sanitary conditions		
Documentary proof of compliances certified by the competent authority		
SSC Specific		

**SECTION 4: PERFORMANCE MEASUREMENT AND IMPROVEMENT**

**43. Documentary evidences of suitable indicators to monitor and measure the performance. Key aspects that need to be certified by the applicant are:**

Aspect	Yes/No	Remarks
Documented process of trade learning progress		
Documented processes of workshop upkeep and modernization		
Documented process on tracking health and safety incidences		
Documented process on gathering feedback of placed students with the employers		
Documented process of tracking trends in employability and placement record		
SSC specific		

**44. Documentary evidences of practicing continual improvement. Key aspects that need to be certified by the applicant are:**

Aspect	Yes/No	Remarks
Documented process of taking student feedback on curriculum		
Documented processes of taking student attendance		
Documented process on tracking student dropouts		
Documented process on tracking student performance on tests		
Documented process of tracking teacher attendance		
Documented process of tracking placement patterns		
SSC Specific		

**45. Documentary evidences of Management Review. Key aspects that need to be certified by the applicant are:**

Aspect	Yes/No	Remarks
Documented process of conduction of Management Review Meetings (MRM)		
Documented processes of taking actions on the basis of MRM		
Documented process on tracking Faculty Review		
Documented process on tracking training needs of the faculty by the management		
Documented process of tracking student complaints and redress of the same		
Documented process of analysis of student feedback		
Documented process of analysis of results in skills assessment		
SSC Specific		

**46. Documentary evidences of mechanism on Complaint Handling. Key aspects that need to be certified by the applicant are:**

Aspect	Yes/No	Remarks
Documented process on Information Sharing on complaints with all stakeholders		
Documented processes of acknowledgement of receipt of complaint		
Documented process on investigation of the complaint		
Documented process on tracking training needs of the faculty by the management		
Documented process of tracking student complaints and redress of the same		
Documented process of investigating the student complaints		
Documented process of closure of the student complaint		
Documented process of keeping record of student complaint		
SSC specific		

**OTHER RELEVANT INFORMATION**

**47. Does the Institute receive any grant from Govt. of India / State Government/ Union Territory or any other source?**

(Attach details of grants received in last 3 years as Enclosure 7)

**Performance Review****A. Overall**

Sl. No.	Performance Criteria	Unit Measurement	2012-13	2011-12	2010-11	Remarks
1.	Utilization of Students seating capacity	%				
2.	Retention Rate (Of students admitted)	%				
3.	Students/Teaching Staff	Ratio				
4.	Pass out (Of students appeared)	%				
5.	Students on completion got jobs	%				
6.	Total yearly expenditure / Initial budget sanctioned	%				
7.	Students on completion expressing satisfaction on quality of training	%				
8.	Teachers expressing satisfaction on all round conditions of the VTP	%				
9.	SSC specific					

**B. Trade wise**

S.No	Course Name	Duration	No. of batch/year	Students in each batch	No. of trainees appeared for Exam	No. of trainees certified	No. of trainees placed	Remarks

**List of Enclosures**

	<b>Enclosed</b>
1. List of Branches	Yes / No
2. PAN and IT Return	Yes / No
3. Audited Balance Sheet	Yes / No
4. Registration Certificate of Trust/ Society	Yes / No
6. Copy of Recognition Certificate	Yes / No
7. Copy of Affiliation Certificate	Yes / No
8. Building Approval Document	Yes / No
9. Staff Particulars	Yes / No
10. Training detail of Staff	Yes / No
11. Drinking Water	Yes / No
12. Health and Sanitary Conditions	Yes / No
13. Fire Safety	Yes / No
14. Bus Service details	Yes / No
15. Details of Grants received in last 3 years	Yes / No
16. Detail of Assessment procedure	Yes / No
17. Infrastructure and Training Process details for each job role applied for	Yes / No

**Appendix – B**  
**AFFILIATION CHARGES MATRIX- Effective from 16<sup>th</sup> April 2015**

#	Charges	NSDC Funded Partners and Government Institutions	Non-NSDC Funded Partners
1.	Application Fee (One Time)	₹5000/-	₹5000/-
<b>Compliance Checks at the VTP-HQ Level by MESC Due Diligence Partner</b>			
2.	Management Credentials	₹50,000/-	₹65,000/-
	Adherence to Regulatory Requirements		
	Documentation of Processes		
<b>Curriculum Validation based on QP</b>			
3	Curriculum Alignment Per QP along with Training Delivery Plan review	Waived off	Waived off
	Validation of Curriculum Per QP [Curriculum package would consist of Syllabus, Student manual, Trainers Guide, Training manual]	₹15,000/-	₹15,000/-
<b>Centre Validation of Key Infrastructure and Equipment</b>			
4	Charges for validating infrastructure and equipment per Centre per visit.	₹25,000/-	₹25,000/-
<b>TOTAL FEE at the time of Application</b>		<b>95,000/-</b>	<b>110,000 /-</b>
<b>TOT Charges Per QP (subject to a minimum no. of 2 nominations)</b> (Boarding/ Lodging and Travel of their own trainers to the training venue will be the responsibility of the VTP)			
5	Per Trainer Training Charge including Assessment and Certification charges	₹10,000/-	₹10,000/-
	Per Trainer Charge only for Assessment and Certification	₹5,000/-	₹5,000/-

**Annual Affiliation Fee on Grant of Affiliation**

Items	NSDC Funded Partners and Government Institutions	Non-NSDC Funded Partners
Fixed mandatory charges per center (1 <sup>st</sup> Year)	₹15,000/-	₹25,000/-
Annual Affiliation Fee per Centre	₹20,000/-	₹20,000/-
Variable (per QP applied/ affiliated by the VTP) (1 <sup>st</sup> Year)	₹35,000/-	₹35,000/-
Annual Renewal cost (per QP)	₹20,000/-	₹20,000/-

## **AFFILIATION CHARGES MATRIX**

### **Note:**

- All fees once paid will be non-refundable
- The Affiliation is granted on yearly basis and any change in management, infrastructure, and any other item impacting the affiliation should be reported to MESC immediately.
- After 1<sup>st</sup> year of Affiliation, the Training Partner would be reviewed on various quality parameters/ processes and affiliation before renewal of affiliation.
- In case of any discrepancy detected with the VTP in regard to delivery of the training program related with affiliated QPs, MESC reserves the right to cancel the Affiliation.
- MESC reserves the right to alter the affiliation charges anytime
- The Training Partner would bear the cost related to Travel, boarding and lodging or any related cost for the purpose of Affiliation.
- Economy Class Air Fare, 1<sup>st</sup>/ 2<sup>nd</sup> Class AC Train Fare and accommodation in Guest House or 3 Star Hotel (boarding and lodging) etc. to be taken care by the Training Partner for travel of MESC staff, it's partner and/ or any attached resource person.
- MESC reserves the right to waive off certain affiliation in certain circumstances and on certain conditions.



COMPLIANCE CHECKS REQUIREMENTS

Information form

**SECTION A : PARTNER INFORMATION**

PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION (IN BLOCK LETTERS ONLY):

Firm name (legal name)\*:

Firm doing business as (dba names, trade names):

Physical business location (please list all known addresses and indicate which one is preferred for the site visit by KPMG):\*

Please provide the contact details of the person who will be present at the site

Telephone: \*

Fax:

Name of partner's key principal:\*

Title:

E-mail of partner's key principal:\*

Website :

PAN No:

TAN No:

Ownership/structure of business\*:

Private / Public Limited Company / Partnership / Proprietorship / Individual/ Others (please indicate):

Date of business inception or incorporation: (DD/MM/YY)

Company registration no. (if applicable):

Nature of (proposed) relationship with MESC:

Partner's principal business activity:\*

Please provide copies of company brochures, principal's bio, annual reports, and/or similar documentation.

Please use this space for any other information that you would like to add:

**SECTION B: PERSONNEL**

**Key Personnel within the firm\***

<b>PLEASE PRINT OR TYPE THE FOLLOWING INFORMATION (IN BLOCK LETTERS ONLY):</b>		
<b>Name</b>	<b>Position</b>	<b>Role</b>

\*mandatory fields

**SECTION C: REFERENCES**

**Trade References (to be provided by the partner)\***

Customer References (persons/firms to whom partner has provided similar services as proposed for MESC). List full company name and name of at least two individuals (with titles)

Firm name:	Contact's Name:	Address:	Tel#:
Firm name:	Contact's Name:	Address:	Tel#:
Firm name:	Contact's Name:	Address:	Tel#:

Industry References (persons/firms familiar with the partner's company such as business partners, trade associations etc.). List full company name and name of atleast two individuals (with titles)

Firm name:	Contact's Name:	Address:	Tel#:
Firm name:	Contact's Name:	Address:	Tel#:
Firm name:	Contact's Name:	Address:	Tel#:

\*mandatory fields

Consent Form

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**To Whom It May Concern:**

I hereby authorize KPMG or their representatives; to furnish background verification report to Media & Entertainment Skills Council (MESC); which may include verification of our bank statements and verification of our financial statements.

The verification process would warrant KPMG to conduct verification of educational qualification degrees of any three individuals from the training staff/ assessors of our institute/ company.

The process would also warrant KPMG to produce photographic evidences of our premises.

I hereby grant authority to KPMG or their representatives to access or be provided with full details of information in respect to character of our entity and a maximum of two stakeholders from the records maintained by local authorities such as a police verification, court record checks and online sources etc.

We hereby authorize KPMG and their representatives on behalf our organization/firm to go ahead with the screening process.

**Signing Authority - On behalf of the organization**

Signature .....

Name.....

Title .....

Date .....

Details of the Chartered Accountant / Auditor of the business associate

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Chartered Accountants Details			
Complete Name of the Auditing Firm			
Name of the Chartered Accountant			
Membership Number			
Mobile/Landline Number		OR	
Email Address			
Address			

**Bank Authorization letter of the business associate**

Date:  
From,  
Name:  
Contact Address/Number:

To,  
  
Bank Manager  
Bank Name:  
Bank Address:

Dear Sir/Madam,

.....bearing account number.....(branch details)

Hereby authorize KPMG to conduct verification of current account's bank statement.

Kindly do the needful.

Regards,

**Signing Authority - On behalf of the organization**

Signature .....

Name.....

Title .....

Date .....

### List of Enclosures for compliance checks

1. Bank statement for the period ending 31st March for Last 2 (Two) year (e.g. we only need the statement to reflect closing balances as of 31st March) Bank Statement duly signed by and stamped by the concerned authority.
2. Last 2 (Two) years income tax returns, duly signed by and stamped by the Chartered Accountant.
3. Financial details such as Balance sheets and Profit and Loss statement for last 2 years duly signed and stamped by the Chartered Accountant
4. Copy of Incorporation / Establishment document of the business associate
5. Copy of PAN, TAN or PF registration document of the business associate
6. Proof of address and proof of identity (preferably, copy of a passport and PAN) for the two stakeholders on whom court records check will be conducted (typically the key principals of your organization)
7. Please provide details of teaching staff or assessors available for each of the job roles you have applied. (Also, please share a copy of resume of each)

Sl.No.	Name	Designation	Degree/Diploma	Industry Experience	Instruction Experience	Regular/Visiting