



IS submitted with reference id : 3038722

message

olutionmail@ncte-india.org <esolutionmail@ncte-india.org>
: principal@scottishchurch.ac.in

1 October 2015 at 12:00

NATIONAL COUNCIL FOR TEACHER EDUCATION (NCTE)

(A Statutory Body of the Government of India)

HANS BHAWAN, (WING II), BAHADUR SHAH ZAFAR MARG,
NEW DELHI- 110 002.

Dear Sir/Madam,

National Council for Teacher Education (NCTE) acknowledges the receipt of Online GIS Application Form from your institute. The same has been forwarded to the concerned division for necessary action.

Your Online GIS Application number for future reference is: 3038722

Thanking You,

e-Governance Division,

National Council for Teacher Education,

Hans Bhawan, Wing-II,

1, Bahadur Shah Zafar Marg,

New Delhi-110 002.

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

GIS Application Reference Number 3038722
Name of Institution Scottish Church College
Name of Society/Trust/Company UCNITA
Management Category Government-aided
Institution Category Co-Education
Whether the Institute is a Composite Institution Yes
Whether the Institute is a Minority Institute Yes
Address (with Plot No./Khasra No.) 1&3, Urquhart Square, Kolkata - 700006
Name of Village Hedua -Beadon Street
Tehsil/Division Kolkata
State/Union Territory West Bengal
District Calcutta
Pincode 700006
Mobile Number 0842002078
Landline Telephone Number 03323503862
Latitudinal Position of Institute 22.587987
Longitudinal Position of Institute 88.369915
Jurisdiction Region East Regional Committee
E-Mail ID principal@scottishchurch.ac.in
Website Address http://www.scottishchurch.ac.in

Details on Courses Recognised Till Date

Application ID	Name of Course	No. of Units	Date of Recognition	Recognition Order No	Name of Affiliating University
ERC/APE00245	B.Ed	1	2004-11-02	ERC/7-50(ER-50.5.7)/2004/3145	University Of Calcutta

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	Dr. Amit Abraham
Designation of the Authorised Person	Principal
Mobile Number of the Authorised Person	0842002078
Signature of Authorized Person along with Institute Round Seal	