**Details of Linked Institutions**

1. **Details of the Institution(s):**

| **SN** | **Name of the Institution** | **Country of Location** | **Recognition Status** | **Phone** | **Fax** | **Email** | **Website** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 1 |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |

1. **Details of TVET studies offered:**

| **SN** | **Name of the Institution** | **Title of the TVET Studies**  | **Certification/Diploma Level** | **Duration of Study** |
| --- | --- | --- | --- | --- |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |

**Signature(s) of Proponent(s)**

**Date: ……………………….**

Note: *Attach a copy of MoU signed with the institute along with the proof documents of recognition status of the institute in the host country.*

*Details of the all the proposed courses must be filled in this form.*