



Sunrise Group of Management & Studies

(Approved by N. C. T., New Delhi, Govt of India)

Registered under Department of Promotion of Industry Trade, Govt of India

Registered as an ISO 9001:2015 Certified for Quality Education Management System

Registered as a registered Member of Quality Council of India

Regd. No. ROS/North/ALP/372/2021

Application Form For Establishment/Renewal Of Study Centre

To,
Director

Sunrise Group of Management & Studies
Mam/ Sir,

Applic. No.

Photo

1. I/We have taken note of all the rules & regulations of the **Sunrise Group of Management & Studies** I will abide by all the rules in the future.

2. Name of Applicant (s).....Designation.....

3. Father's/Husband Name.....

4. Name of Institute.....

5. Corresponding Address.....

.....PIN No.....

6. Mob.No.....Whats App No.....

7. E-mail.....

8. CENTERS ESTABLISHMENT FEES

Rs.....

Name of Bank.....Place.....

Bank Draft No.

9. Declaration Matter Given in the back side of this form type of the 100/- rupees non judicial stamp paper after field by the applicant must be notary.

10. Attach these file with this form :

(a) PAN Card

(b) Adhar Card

(c) Pass Port Photo

(d) Staff List

(e) Society Registration

(f) Declaration

(g) Building Photograph

(h) Qualification Proof

(i) Fees Deposit Slip

(j) Hospital Tie-up Latter

(k) NOC of 15 km. range Earlier branch.

Place :

Dated :

Sign. of Applicant

Witness Name.....Sign. of Witness.....

Aadhar No..... Contact No.....

FOR OFFICE USE ONLY

Authorised Center Code :

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Date of Issue

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R. R. No. :

Date :

Authorised Signatory

Helpline : +91-9350661700

website : www.sunrisegroupedu.in

DECLARATION

Before The Director / Secretary

Sunrise Group of Management & Studies

PHOTO

I/Shri.....Son of Shri.....
Aged.....Residence of.....
.....Distt.....Pin.....
Phone No.....Office.....Mobile.....
Institute Name.....
Institute Address.....

Declare as under That :

1. Our Institute will work as an authorized franchises of **Sunrise Group of Management & Studies**.
2. We shall not claim/mention our affiliation to or use logo/Regd. Trade Mark/Design etc of **Sunrise Group of Management & Studies** . in our communication/ Correspondence/ Advt. Display etc.
3. I/We agree to and abide by the Rules & Regulations of the **Sunrise Group of Management & Studies** & our Institute will work according to these Rules & Regulations.
4. In the event of outstanding /non payment of dues to **Sunrise Group of Management & Studies**. We shall not ask for the enrolment number and/or exam result in any circumstances. All payment will be deposit in **Sunrise Group of Management & Studies** in Bank Account only. if any form DD / Bank Deposit / Online.
5. You have to submit N.O.C. (No Objection Certificate) of 15 km. Range of Franchise which is run by **Sunrise Group of Management & Studies** earlier.
6. Branch will not advertise and take money for the course or any work which is not mentioned in **Sunrise Group of Management & Studies**.
7. Branch is not permitted to advertise the same course or take branch of another group. within the period of branch date.
8. Students Facilities of branch of students will be provided after filling complete form, documents, Fees submit & after approve form by the **Sunrise Group of Management & Studies**.
9. Franchise will not permit to open any sub center or branch.
10. If any branch withdraw self from **Sunrise Group of Management & Studies** then no return fees of branch & students.
11. Complete Audit, Students List, Fees Deposit All Slip Must be submitted before 31st March of current Session.
12. Result of Students will be given after no due of branch of current session.
13. In Case of dispute, if any Agra Court will be the Jurisdiction only.

Therefore, I.....declare that the information furnished in this form and the information furnished in the form for Establishment of franchisee are true to the best of my knowledge. If I am unable to run my franchisee, I will not claim to return my franchisee fees & Exam Fees of students.

Place :

Signature of the declarant

Date :

Franchise Rules & Basic: Infrastructures

1. **Franchise must have 20 bed Hospital or tie up with the 20 bed hospital.**
2. **Franchise Holder or any one staff must have bachelor or master degree in Paramedical / medical & Ayush field.**
3. **Class Room :**~6-Class Room for 30 students (minimum area 300 sqft.) should have proper ventilation, well- illuminated black board/white board and availability of adequate furniture and ceiling fan.
4. **Lab :**~The Size for 30 students should be least 30x25 sqft. with adequate lighting and exhaust Fans or ceiling fans. The Lab should have the following tools/equipment/apparatus or material for practical training:-
 - (a) Chart & model (relating human anatomy and physiology i.e. heart, kidney, eye, ear, etc.) 10
 - (b) Sports i.e. heart, kidney, eye, ear, bones etc. and slides. i.e. Slides or RBC, WBC etc. 20
 - (c) B. P. Instrument- 10, Stethoscope-10, Thermometer-25, Glucometer-7
 - (d) Weighing Machine-5, FirstAid Box-10, Splint & Structure-1, Human Skeletons-1
 - (e) Nutrients Calculation Chart-1, Bandage & Dressing articles-1
5. **Physical Facilities :**~The Instruction should have the facilities for drinking water, Bathroom & Toilet (Toilets for Ladies & Gents Separately)
6. **Library :**~Library should have a minimum 30 books/articles/magazines etc. related to subject.
7. **Clinical Facilities :**~The clinic/hospital should have the following minimum facilities.
 - (a) OPD Facility
 - (b) Dressing FacilityOn instruction may be attached with reputed clinic/hospital and it should have the certification for collaboration.
The clinic/hospital will be inspected at time of inspection.
8. **Faculty and supporting staff :**~

Faculty and supporting staff	Education Co-ordinator	Graduate
Instructor	M.Sc. (Zoology)/ Life Science or B.Sc. with 2 year exp.	
Medical Doctor	Degree/Diploma in Naturopathy from reputed Institution	
Lab Assistant	Relevant to job	
Assistant	Relevant to job	
Receptionist cum clerk	Relevant to job	
9. **Franchise Audit must be submitted quarterly (June, Sept., Dec., & March)**
It may be submitted by online or sending hard copy on admin office address.

DATE.....