



Note: Please do not delete any item in the form, provide details as applicable, wherever information is not available mention N.A. The form may need to be sent back for corrections if any item is changed or deleted.

COURSE APPROVAL FORM FOR OPEN PARTICIPATION COURSES*

*(Course approval can be taken even without receipt of funds)

1. Name of the Course Coordinator/PI : _____ Designation: _____
Deptt./Centre: _____
Co-coordinator (I)/Co-PI, if any : _____
(i) Name : _____ Designation: _____
Deptt./Centre: _____ Signature: _____
(ii) Name : _____ Designation: _____
Deptt./Centre: _____ Signature: _____
2. Title of the Course _____
3. Batch No. of the Course _____
4. Name and Address of Program Partner with GST Details (if any) _____

GST details _____ (Pl. attach. Copy)
5. Payment Terms: before completion (Full/Part)/After Completion(full) _____
6. Date of Commencement _____ Expected date of Completion _____
7. Duration _____ Months (No. of hours _____ Lectures; No. of hours _____ hands on)
8. Mode of delivery(Class room/online/self-paced/hybrid) _____
9. Expected no. of Participants: _____
10. Copy of Schedule as per attached format in Annex CEC-01-A(i): Yes
11. Course Fee Per participant: Rs _____ + GST @ 18%: Rs _____ Total Fee: Rs _____
(Average rate per hour @ Rs. 1000/- + GST & maximum fee per hour @Rs.1500/- +GST)
12. Payment Portal for Fee Collection : IITR Portal/ EdTech Partner Portal
13. Estimated total Fee receipt for the Course [Total expected participants X Fee per participant]
= Rs. _____
14. IITR Receipts as per MoU =% = Rs _____
15. Details of faculty/expert, if any :

Name of faculty	Designation	Employees No.	Department/Centre	Signature



16. Eligibility/screening criteria:
 17. Link to portal/course page/copy of brochure:
 18. Criteria for releasing the certificate:
 19. In case of refund (course cancellation/dropout), mention the process:
- Other relevant information (attach sheet, if necessary)

The following documents will be required at the closing of course :

(1) List of internal and external faculty /experts with email and address (2) List of the participants with email and address (5) Time table copy, (6) Soft/hard copy of the group-photo (if available).

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Signature of the Course Coordinator (with date)
Phone :
Mobile :

Signature of Head of the Deptt./Centre
(with date & stamp)

Endorsement by CEC Office, I.I.T. Roorkee

The above request is in accordance with the norms.

CEC Approval no. :	_____
Course Code :	_____
Dated :	_____

Approved/Not Approved

Dealing Asstt.

Sr. Superintendent, CEC

Coordinator, CEC

Copy after approval to:

(1) Course Coordinator (2) Concerned HoD (3) Coordinator, CEC

Note :

Certificates format will be as per CEC guidelines.

CEC guidelines will be followed in case of awarding the grades.



Annex–CEC-01-A(i)

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Course curriculum and course schedule:

Format of the course schedule (fill or can be attached as a separate file)

(i) Details of Lectures

Sl No.	Name of IITR Expert/Industry Expert	Topic of Lecture	Mode (Live or offline)	No. of Hours	Date of Lecture/(Week No.)
1.					
2.					
3.					
4.					
5.					
6.					

(ii) Details of Hands-on/project/assignments/use cases

Sl No.	Topic of Hands-on	Mode (Live or offline)	No. of Hours	Date of Hands-on/project/assignments/use cases/(Week No.)
1.				
2.				
3.				
4.				
5.				