

Government of West Bengal Office of the District Magistrate (Utkarsh Bangla Cell) North 24 Parganas, Barasat



Phone No. 033-25846313 | E-Mail: ubnorth24pgs@gmail.com

Memo No: 673 /UB

Date: | 9 -Jul-23

NOTICE

Proposals are invited from the Utkarsh Bangla training provider(s) to increase the number of active training providers to operate under LOI (Third Party Placement Assurance offered by the industries/establishments) module of the Utkarsh Bangla scheme for expanding the reach out of the short term training initiative of the Government of West Bengal.

Eligibility Criteria:

- a. Training Providers must be previously enrolled under Utkarsh Bangla programme.
- b. Training Providers are eligible to apply if their registered office is situated / at least one of their training centers is situated under North 24 Parganas district.
- c. Training provider neither blacklisted nor dis-empaneled any time before from any of the schemes.
- d. No adverse reports/ complaints are pending against the training provider and awaiting disposal.

Proposals on training provider(s) official letter-head along with training details as per Annexure-I, to be submitted by 07th August, 2023 at the following address via special speed post/ registered post:

To, The District Nodal officer (Skill), Utkarsh Bangla Cell, Room No: 510 New Administrative Building, 4th Floor, Barasat, North 24 Parganas

In addition with this a copy has to be emailed to the email id: ubnorth24pgs@gmail.com

Additional District Magistrate (Skill)

North 24 Parganas

Memo No: 673 /UB

Date:_<u>19</u> -Jul-23

Copy forwarded for necessary information to:

- 1. The Project Director, Paschim Banga Society for Skill Development.
- 2-5. The Subdivisional Officer, (Barasat, Bongaon, Barrackpore & Basirhat), North 24 Parganas.
- 6. DIO, NIC, North 24 Parganas with a request to upload the notice on District official website.
- 7-28. The Block Development Officer, (All), North 24 Parganas.
- 29. CA to District Magistrate for kind information of District Magistrate, North 24 Parganas.

Additional District Magistrate (Skill)

North 24 Parganas

(Must be printed on Training provider official letter-head)

Annexure-I

1.	Name of Tra	aining provider				
Training Provider CODE						
2 Full Address of Training Provider registered Office						
4. Pro	Proposed Training Venue or Centre (Block/Municipality)					
5.	Contact no	. of Training Provider				
6.	Email ID of	Training Provider			×	
7. Pas	st Performano	ce of the Training Provide	er under Utkarsh Ba	ngla (along with supp	oorting documents)	*
Training Center District Name		Training Center ID	Course Name	Total Nos. of candidates certified	Total Nos. of Certified candidates are in Wage Employment	Total Nos. of Certified Candidates are in self Employment
8.	Proposals	of Trainings to be don	e in this District			
SI. No.	. Course Name		Sector name	го	LOI Details	
9. TOT certified trainer detail				Trainer Name	Я	ToT certified no
SI No Course Name				Halliel Hallie		
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10. Declaration:

I/We do hereby declare that the information furnished above is true, complete and correct to the best of my knowledge and belief. The above said Training Provider neither Blacklisted nor Dis-empaneled anytime before from any of the schemes and no adverse reports/complaints are pending against the training provider and awaiting disposal.

(Signature of Training Provider)

Signatory Name:

Date:

Stamp: