

National Council for Teacher Education(NCTE)

(A Statutory Body of the Government of India)

G-7, Sector-10, Dwarka, Landmark – Near Metro Station, Delhi – 110075

4-year Integrated Programme (B.A. B.Ed / B.Sc. B.Ed) for Transition to Integrated Teacher Education Programme (ITEP)

Applied for the Discipline

S No.	Discipline	Stage(s)
1	B.A. B.Ed.	Secondary (1 unit), Middle (1 unit)

INSTITUTION'S Details

Application Code	2627202509192881	Name of the Institution	KARMAVEER HIRE ARTS, SCIENCE, COMMERCE AND EDUCATION COLLEGE, GARGOTI
Type of Institution	GOVERNMENT AIDED COLLEGE	Sub Type of Institution	GOVERNMENT AIDED COLLEGE
Programme Name	Integrated Teacher Education Programme (ITEP)		
NAAC accreditation	A	NAAC accreditation certificate	
Date of issue of NAAC	14/02/2023	Valid upto	13/02/2028
Whether Institute of National Importance (IoNI)?	NO		
Whether Institutes of Eminence (IoE)?	NO		
Whether the institution has obtained NIRF Ranking?	NO		
Whether the Institution run under self-financing scheme?	NO		
Whether Minority Institute?	No		
Year of Establishment of Institution	1957	Website	HTTPS://WWW.KHCOLLEGE.AC.IN
E-Mail ID (For recovering your password and any future communication with NCTE)	khcgargoti@rediffmail.com	Alternate E-Mail ID	khcg49.cl@unishivaji.ac.in
Institution Mobile No. (For future communication with NCTE)	9422417278	Telephone No.	-7507609068
Fax No.	02324220076		

Address of the Institution at the time of Recognition

Survey No.	Khata No.	Gata No.	Khasra No.	Plot No.	1033/2	Street/ Road	HT. MURLIDHAR NAGAR, GARGOTI
Village / Town / City					GARGOTI	Post Office	GARGOTI
Taluka / Tehsil / Mandal					BHUDARGAD	Town/ City	GARGOTI
State					MAHARASHTRA	District	KOLHAPUR
Pin Code					416209		
Whether any change in address after recognition of 4 Year ITEP(B.A.B.Ed/B.Sc.B.Ed)?					No		
Particulars of Authorized Person/Secretary/Correspondent							

Name	PROF DR UDAYKUMAR RAMCHANDRA SHINDE	Father's Name	RAMCHANDRA MAHADEV SHINDE
E-Mail ID	shindeudaykumar@gmail.com	Mobile No.	7507609068
Designation	PRINCIPAL	Permanent Account Number (PAN)	ABRPS3670C

Authorization letter on the stamp paper as per admissible government rate for filling ITEP

**Details of Head/ Principal of the Institution**

Name	PROF DR UDAYKUMAR RAMCHANDRA SHIND	E-Mail ID	SHINDEUDAYKUMAR@GMAIL.COM
Mobile No.	7507609068		

Important Locations

Nearest Railway Station	KOLHAPUR	Distance in km	55
Nearest Police Station	GARGOTI	Distance in km	1
Nearest Nationalised Bank	BANK OF MAHARASHTRA	Distance in km	1

Affiliating Body Details

Affiliating University State	MAHARASHTRA	Affiliating University	SHIVAJI UNIVERSITY
Affiliating Body NOC Letter No	UKF1090/3045/VISHY-2	Affiliating Body NOC Date	17/11/1990

PARENT ORGANIZATION DETAILS

Type of Parent Organization	TRUST		
Name of Trust/ Society/ Company	SHRI MOUNI VIDYAPEETH, GARGOTI		
Postal Address of the Parent Organization			
<input type="radio"/> Survey <input type="radio"/> Khata <input checked="" type="radio"/> Gata <input type="radio"/> Plot No.	1033/2	Street/ Road	HT. MURLIDHAR NAGAR,
Village / Town / City	GARGOTI	Post Office	GARGOTI
Taluka / Tehsil / Mandal	BHUDARGAD	Town/ City	GARGOTI
State	MAHARASHTRA	District	KOLHAPUR
Pin Code	416209		
Permanent Account Number (PAN)	AANTS9251N	TAN (If Applicable)	NA
Copy of Not-for-Profit Certificate (PDF with size less than 3 MB)			

Society/ Trust/ Company Members Information

S.No.	Name	Designation	Mobile Number	Email Id	Membership valid upto (DD/MM/YYYY)	PAN	Aadhaar No.
1	DR. PARASHARAM BHIMRAO PATIL	SECRETARY	9422417278	drpbpatilkhcgrt@gmail.com	31/12/2028	AAUPP8096P	693986574533

Registration certificate of the Trust/ Society/ Company (PDF with size less than 3 MB)



Byelaws of the Trust/ Society/ Company showing objectives in the Byelaws of the Trust/Society/Company to run the Teacher Education/Physical Education courses (PDF with size less than 3 MB)



Certificate u/s 12AA/ 12AB of the Income Tax Act, 1961 (PDF with size less than 3 MB)*



MULTI DISCIPLINARY PROGRAMME(S)

Whether any programme(s) other than Teacher Education Programme(s) is being offered by the Institution?											Yes
S No.	Programme	Stream	Course	State	Affiliating University/ Body	Affiliation Order No.	Affiliation Order Date	Order	Approved Intake	Present Intake	Start Year
1	UnderGraduate Arts		B.A	MAHARASHTRA	Shivaji University	Affillition/T-2/fa-72/3915, date - 12/07/1991	1991-07-12		360	235	1975
2	UnderGraduate Commerce		B.Com	MAHARASHTRA	Shivaji University	affillitation/t-2/fa72/3915,date 12/07/1991	1991-07-12		120	120	1975
3	UnderGraduate Science		B.Sc	MAHARASHTRA	Shivaji University	affillition/t-2/svm/v.p.vk 28 date-26-06-2023	2023-06-26		120	120	2006
4	UnderGraduate Other		B.C.A	MAHARASHTRA	Shivaji University	affiliation /t-2/svm/pr.no/1810 date- 14/08/2024	2024-08-14		80	24	2008
5	PostGraduate Arts		M.A	MAHARASHTRA	Shivaji University	shivaji vi/affiliation/ssp/10237 date 10/01/2012	2012-01-10		150	73	1984
6	PostGraduate Commerce		M.Com	MAHARASHTRA	Shivaji University	affiliation/t-2/svm/v.p.v.no 28/date 26/06/202326	2023-06-26		50	5	2021
7	PostGraduate Other		M.C.A.	MAHARASHTRA	Shivaji University	affiliation/t-2/svm/prasa/1782 date 12/08/2024	2024-08-12		60	66	2024
8	PostGraduate Science		M.Sc	MAHARASHTRA	Shivaji University	affiliation/t-2/svm/pr.sa./1839 date 19/08/2024	2024-08-19		30	33	2024

DETAILS OF EXISTING TEACHER EDUCATION PROGRAMME(S)/ COURSES

S.No.	Programme	Institution Code/Application No.(of NCTE)	Recognition Order Detail	Changes in Course Intake	Revised Order Detail	Withdrawal Order Detail	Restoration Order Detail	Change in the Institution Name
1	Name: 4-Year Integrated programme leading to B.A. B.Ed./ B.Sc. B.Ed degree.	113155 Start Year: 2000-01 Approved Unit: 1 Approved Intake: 80 Student Admitted: 	Order No.: no/wrc/5-6/21/2000/8352 Date: 10/10/2000 Attachment:	Order No.: Date: Session: 0 Attachment:	Order No.: Date: Attachment:	Order No.: Date: Attachment:	Order No.: Date: Attachment:	Order No.: Date: Attachment:
	B.A. B.Ed Medium: Marathi							

LAND DETAILS

Land area mentioned in the Affidavit (in sq m)	27600	Built Up area mentioned in the Affidavit (in sq m)	2927.48
<input type="radio"/> Survey <input type="radio"/> Khata <input checked="" type="radio"/> Gata <input type="radio"/> Plot No.	1033/2		

Mode of Possession of Land

Mode of Possession	Ownership		
Name of Owner of the Land	DIRECTOR SHRI MOUNI VIDYPEETH GARGOTI	Whether the ownership of land is in favour of Society/ Trust/ Company	Yes

Registration Details

Date of Registration of land	26/03/1981	Registration No.	1 TO 1896
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Registration Authority of land documents with address

Name of Registering Authority of land documents	MAHARASHTRA REVENUE DEPARTMENT	Village/ Town/ City	GARGOTI
Taluka / Tehsil / Mandal	BHUDARGAD	State	MAHARASHTRA
Attachment of certified copy of registered land documents alongwith schedule of the property and plan of open space			

DETAILS OF MUTATION CERTIFICATE/ PERMISSION OF LAND USE/ NON-ENCUMBRANCE CERTIFICATE**DETAILS OF MUTATION CERTIFICATE OF LAND**

Whether the Institution has got the mutation of the land & land use in the Revenue Records of the State and obtained a Mutation Certificate thereof.	Yes		
Mutation Certificate No.	663	Date of Issue of Mutation Certificate	24/04/1980
Mutation Certificate Issuing Authority	CITY SURVEY OFFICE PUNE	Total land area mentioned in Mutation Certificate (in sq m)	2927.48
Attachment			

DETAILS OF PERMISSION OF LAND USE/ LAND USE CERTIFICATE (CLU/LUC) FOR EDUCATIONAL PURPOSE

<input type="radio"/> Survey <input type="radio"/> Khata <input checked="" type="radio"/> Gata <input type="radio"/> Plot No.	1033/2		
Date of Issue of CLU/LUC	20/09/2025	CLU/LUC Issuing Authority	GRAM PANCHAYAT GARGOTI
CLU/LUC Letter No.	98/2025	Converted/ diverted land area under the CLU (in sq m)	2927.48
Attachment			

DETAILS OF NON-ENCUMBRANCE CERTIFICATE

<input type="radio"/> Survey <input type="radio"/> Khata <input checked="" type="radio"/> Gata <input type="radio"/> Plot No.	1033/2		
Date of Issue of Non-Encumbrance Certificate	25/09/2025	Non-Encumbrance Certificate Issuing Authority	NOTARY
Non-Encumbrance Certificate Letter No.	746/25/9/25	Total land area mentioned in NEC Certificate (in sq m)	2927.48
Attachment			

DETAILS OF BUILDING PLAN

Total Land Area mentioned in the building plan (in sq m)	27600	Total Built Up Area mentioned in the building plan (in sq m)	2927
Survey Plot No.	Khata Gata 1033/2		

Details of Approving Authority of Building Plan with address (Corporation/ Municipality/ Panchayat)

Name of Approving Authority with address	GRAMPANCHAYAT GARGOTI	Village / Town / City	GARGOTI
Taluka / Tehsil / Mandal	BHUDARGAD	City	GARGOTI
State	22	District	419
Pin Code	416209	Date of Approval	26/03/1981
Building Plan Attachment			

BREAK-UP OF BUILT UP AREA MENTIONED IN THE BUILDING PLAN FOR THE TEACHER EDUCATION PROGRAMME/S

Room No	Room Size(in sq m)
05	46.82
06	46.82
07	69.49
08	46.82
09	46.82
10	46.82
12	64.66
13	23.41
01	43.47
02	43.47
03	46.82
04	46.82
11	44.59
14	23.41

Multipurpose Hall (in sq m)	285.21	Library-Cum-Reading Room (in sq m)	499.82
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Site Plan

Site Plan Issuing Authority	HEAD OF EATABLISHMENT DEPARTMENT CIVIL SHRI MOUNI VIDHYAPEETH GARGOTI	Site Plan No.	101123	Site Plan Date	26/03/1981
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Upload site plan **Other information required**

Whether the building of the institution has been constructed as per National Building Code and the same is fully safe and structurally sound having load bearing capacity as per the Code/ Standards, to run the teacher training course.	Yes
Whether Building Safety Certificate as per National/State Disaster Management Authority acquired or not	No
Whether safeguard against fire hazard has been provided in all parts of the building.	Yes

Fire Safety

Fire Safety Certificate Issuing Authority	KRANTI FIRE SERVICES	Fire Safety Certificate No.	102/2025	Fire Safety Certificate Date	10/02/2025
Fire safety certificate					

Whether the institution's campus, building, facility etc is barrier free/Accessible?	Yes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Safe	<input checked="" type="checkbox"/>	Accessible
Upload certificate to the effect that the institution's campus, building, facility etc is barrier free/ Accessible			Lift	Ramp	Drinking Water	Toilet

DETAILS OF BUILDING COMPLETION

Whether completion of building is as per approved building plan or not	Yes		
<input type="radio"/> Survey <input type="radio"/> Khata <input checked="" type="radio"/> Gata <input type="radio"/> Khasra <input type="radio"/> Plot No.		1033/2	
Taluka / Tehsil / Mandal	BHUDARGAD	Village/ Town/ City	GARGOTI
Street/ Road	HT. MURLIDHAR NAGAR, GARGOTI	State	MAHARASHTRA
District	KOLHAPUR	Pin Code	416209
Date of Inspection by the Engineer	24/11/2016	Date of Construction	26/03/1981
Total Land Area mentioned in the Building Completion Certificate (in sq m)	2564.12	Total BuiltUp Area mentioned in the Building Completion Certificate (in sq m)	2927.48

Building Completion Certificate Issuing Authority

Name of Authority	GRAMPANCHAYAT GARGOTI	Date of Issue	26/11/2016
Address	GARGOTI TAL BHUDARGAD DIST KOLHAPUR 416209	Taluka / Tehsil / Mandal	BHUDARGAD
State	MAHARASHTRA	District	KOLHAPUR
Building Completion Certificate Attachment			

Floor Wise Built-Up Area (in sq m)

	Floor(s)	Constructed
Ground Floor		1129.55
First Floor		920.57
Second Floor		0
Third Floor		0
Fourth Floor		0
Fifth Floor		0
Total Built-Up Area (in sq m)		2050.12

GEOGRAPHIC LOCATION

Latitude	Longitude
16.3183	74.1361528

OTHER INFORMATION

Name of Grievance/Complaint Redressal Officer	PROF DR UDAYKUMAR RAMCHANRDA SHINDE	Contact Number of Grievance/Complaint Redressal Officer	7507609068
Name of Contact Person in case of Emergency	DR SANDIP PANDURANG SHINDE	Contact Number of Contact Person in case of Emergency	9960165516
Email id of Grievance/Complaint Redressal Officer	shindeudaykumar@gmail.com	Email id of Contact Person in case of Emergency	shindesandip70@rediffmail.com
Name of Nodal Officer for Anti Ragging	DR MRS MRUNAL S DESAI	Contact no of Nodal Officer for Anti Ragging	9420355637
Name of Head of Internal Complaint Committee	DR SANJAY BAJRANG DESAI	Contact Number of Head of Internal Complaint Committee	9421287284
Email id of Head of Internal Complaint Committee			sanjaydesai38@gmail.com

Library Details

No. of books in the library	34500	No. of educational journals/ periodicals being subscribed	44
No. of encyclopedia available in the library	1	Total seating capacity in the library	2

PHOTO OF INSTITUTE'S BUILDING

Picture Name (jpeg image less than 1mb)	Mandatory	Picture
Front View	Yes	
Rear View	Yes	
Multipurpose Hall	Yes	
Library	Yes	
Lab1	Yes	
Lab2	No	

Lab3	No		
Playground	Yes		

Court Matters

No	
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PAYMENT DETAILS

Transaction ID	262720250919288123bf8a90e0bdbf70de29	Transaction Ref. No.	NA
Transaction Date	10/4/2025 11:50:58 AM	Transaction Amount	Fee (Rs): NA/-
GST(18%)	NA	Transaction Mode	NA

DISCLAIMER

I, **PROF DR UDAYKUMAR RAMCHANDRA SHINDE** son/ daughter of **RAMCHANDRA MAHADEV SHINDE** solemnly declare that to the best of my knowledge and belief, the information given in the ITEP Application form is correct and complete and is in accordance with the provisions of the NCTE Act, Rules and Regulations as amended from time to time. I further declare that I am filling this ITEP Application form in my capacity as **PRINCIPAL** and I am also competent to fill this ITEP Application form and verify it. I am holding permanent account number **ABRPS3670C**.

Attachment Affidavit

