



NATIONAL BOARD FOR TECHNICAL EDUCATION, KADUNA

**APPLICATION FORM TO BE COMPLETED BY A
PROPRIETOR SEEKING APPROVAL TO ESTABLISH OR MOUNT A
PROGRAMME IN A VOCATIONAL OR INNOVATION ENTERPRISE INSTITUTION**

1.0 PRELIMINARY INFORMATION

1.1 Name of Institution:

.....

1.2 Level of Institution

.....

1.3 (a) Full Postal Address:.....

(b) Location Address.....

1.4 Telephone Number:.....

1.5 Date of Establishment:

1.6

| Proposed Programmes to be Offered and Technical Qualifications | | | |
|--|-------------------|-------------------------|--|
| Titles of Programmes | Level of Training | Terminal Qualifications | When will first intake write final exams |
| | | | |

2.0 JUSTIFICATIONS FOR ESTABLISHING THE INSTITUTION/PROGRAMME

2.1 Summary of the findings of a feasibility study or business plan on the need to establish the institution/programme.

Attach the additional report if necessary.

2.2 Localities from which students would be admitted:

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.....

2.3 No. of Secondary Schools in the catchment area:.....

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2.4 Enrolment and number of students obtaining required pass grades at SSSC by year in the last three years (where applicable):

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2.5 Names of other institutions in the catchments area of the institution offering the same or similar programme(s) at the same level proposed by the institution:

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2.6 Student enrolment in similar programme(s) at the same level by other institutions in the catchment area. Use additional sheets if necessary.

| Institution | Programme(s) Offered | Enrolment | | |
|-------------|-------------------------|-----------|--------|--------|
| | | Year 1 | Year 2 | Year 3 |
| | | | | |

2.7 Complete the table below showing the number of students that have been graduated in similar programmes at the same level by the other institutions in the catchment area in the last three (3) years (where applicable).

| Institution | Programme | Level of Programme | Graduation | | |
|-------------|-----------|--------------------|------------|--------|--------|
| | | | 20.... | 20.... | 20.... |
| | | | | | |

10.0 CURRICULUM AND ENROLMENT

10.1 Supply the information requested for in the table below on the curriculum of the institution and enrolment.

| S/No. | School | Department | Name of Programme | Level of Programme | Current Enrolment | Projected Enrolment for The next 5 – 10 years | | | | |
|-------|--------|------------|-------------------|--------------------|-------------------|---|---------|---------|---------|---------|
| | | | | | | 20..... | 20..... | 20..... | 20..... | 20..... |
| | | | | | | | | | | |

10.2 CURRICULUM STRUCTURE

Attach the curricula and syllabuses of the proposed programmes.

Appraise the curriculum, its structure and proposed method of delivery and evaluation vis-à-vis those of the national curriculum and course specifications issued by NBTE for each programme. Is any provision made in the curriculum structure for Industrial Attachment or on the job training and internship as required by the VEI/IEI minimum guide?

10.3 EVALUATION OF THE STUDENT AND THE CURRICULUM

Briefly state how the curriculum and the students to be enrolled in the programmes will be evaluated to ensure that the minimum academic standards laid down for the programmes would be met at the appropriate level.

11.0 PHYSICAL FACILITIES

11.1 Complete the table below: Use additional sheets if necessary. Attach the list of equipment available in each workshop, laboratory, studio and classroom using the format shown in paragraph 11.5

| S/No. | Department | List the Workshops/ Studio (if applicable) for the programme | Dimensions of Each Workshop Facility and its Capacity | List the Laboratories (if applicable) available for the programme | Dimensions of Each Laboratory facility and its Capacity | List of Classrooms Available for the programme | Dimensions of Each classroom Facility and its capacity |
|-------|------------|--|---|---|---|--|--|
| | | | | | | | |

FOR AGRICULTURAL PROGRAMMES ONLY

11.2 Crop Farms

Complete the table below in respect of all experimental and commercial crop farms, orchards, plantations, gardens etc. available for the programme:

| Type of Farm | Size | Estimated Yearly Output | | |
|----------------------------|-------------|-------------------------|-------------|-------------|
| For example: Commercial | 50 hectares | Cassava Yam | 1000 900 | tonnes “ |
| | | | | |
| | | | | |
| | | | | |
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11.4 Other Field Facilities

Complete the table below in respect of the following field facilities; crop processing; green house; warehouses; survey equipment, meteorological station; pest control equipment; irrigation equipment; farm machinery shed; landscape sites; fertilizer store; arboretum; timber grave yard; nursery tools; hatchery; feed mills; silage pit; hay barn, milking parlour; abattoir; meat shop; spray race; farm office; fish ponds, fish processing facilities; net loft; cold room; fishing vessels.

Indicate NA (not applicable) where necessary

| Description of Facility | Type | Size/Capacity | Remarks |
|------------------------------|---------|---------------|---------|
| For example: Crop Storage | Rhumbus | 1 tonne | Earthen |
| | | | |

11.5 List all the equipment contained in each of the facilities listed in paragraph 11.4 in the table below:

| Facility | Equipment/ Instrument Available | Quantity | Condition of Equipment Functional/ Non-Functional |
|--|---------------------------------------|---------------|---|
| For example: Surveying Instruments | Theodolite Ranging Poles etc | 2 3 etc | Functional “ etc |
| | | | |

11.6 Other Teaching Facilities

Complete the table below in respect of the following facilities for agricultural training: audio visual; drawing room; navigation facilities; museum; armory; tannery; herbarium

| Description of Teaching Facility | Type of Accommodation | Size/Capacity (No. of Students) | Remarks |
|--|--|--|---------|
| For example: Audio Visual Studio | Viewing Room Display room Dark room Store | 10 x 14m ² 10 x 12m ² 8 x 8m ² 10 x 10m ² | |
| | | | |

11.7 List all the equipment contained in each of the facilities in 11.6 above.

| Facility | Equipment/ Instrument | Quantity | Remarks |
|-------------------------------------|-------------------------------|----------------|---------|
| For example: Audio Visual | Projectors Cameras Etc. | 4 8 Etc. | Earthen |
| | | | |

11.8 STAFF OFFICE/ACCOMMODATION

Complete the table below:

| S/No. | No. of Heads of Department Offices | Dimensions of Each | No of Staff Offices | Dimensions of Each | No of Staff Each Accommodates | Common Rooms | Dimensions of Each |
|-------|------------------------------------|--------------------|---------------------|--------------------|-------------------------------|--------------|--------------------|
| | | | | | | | |

11.9 ADMINISTRATIVE OFFICE ACCOMMODATION

Complete the table below

| S/No. | Director's Offices Staff | Dimension of Each | No of Registry's Offices | Dimension of Each | No of Bursary's Offices | Dimension of Each | No of other Offices | Dimension of Each |
|-------|--------------------------|-------------------|--------------------------|-------------------|-------------------------|-------------------|---------------------|-------------------|
| | | | | | | | | |

11.10 STUDENT ACCOMMODATION (IF INSTITUTION IS TO BE RESIDENTIAL)

Complete the table below. Attach a list of the furniture and other items in each accommodation listed

| S/No. | No of Male Student Hostels | Bed Capacity of Each | No of Female Student Hostels | Bed Capacity of Each | No of Student's Common Room | Seating Capacity of Each |
|-------|----------------------------|----------------------|------------------------------|----------------------|-----------------------------|--------------------------|
| | | | | | | |

11.11 SPORTS' FACILITIES

Supply the information in the table below. Attach a list of equipment available for each sport or game if they cannot be accommodated in the space provided

| Athletic Facilities | | Game Facilities | |
|---------------------|--------------------|-----------------|--------------------|
| Track and Field | Equipment for each | Fields/Courts | Equipment for each |
| | | | |

11.12 CENTRAL LIBRARY

Complete the table below in respect of the Central Library of the institution. Attach a list of all books and non-book materials available in the Library/Resources Centre. Does the institution encourage departmental libraries? If so, how many of them exist in the institution?

| S/No. | Service Type | Dimension of Space Available | No of Readers it can accommodate | No of Staff Offices | Dimension of Each | No. of Resource Centres/- Materials |
|-------|--------------|------------------------------|----------------------------------|---------------------|-------------------|-------------------------------------|
| | | | | | | |

11.14 STAFF ACCOMMODATION

Supply the information required in the table below in respect of accommodation for staff of the institution (if any)

| S/No. | Quarters' Identification Number | No of Bedrooms | Type of Furnishing | Rank of Staff Occupying or to Occupy | Rent Paid monthly by Staff | Distance from Campus |
|-------|---------------------------------|----------------|--------------------|--------------------------------------|----------------------------|----------------------|
| | | | | | | |

12.0 STAFFING

List all teaching and non-teaching staff employed by the institution:

| Name of Staff (All Academic Staff first) | Qualifications with dates | Rank | Experience, teaching/working, list of all places the staff has worked including duties performed and dates | Duties to be assigned/ courses to teach | Indicate if Full-Time or Part-Time |
|--|------------------------------|------|---|--|---|
| | | | | | |

13.0 FINANCIAL STATEMENT

13.1 REVENUE AND EXPENDITURE

Attach current Bank Statement and Audited Financial Statement of the institution in the past three years preceding the application (where applicable)

| | | Revenue of Institution in the past 3 years | | | Expenditure in the past 3 years | | | | | | |
|------|----------------------|--|-------|---------|---------------------------------|---------|---------|---------|-----------|---------|---------|
| S/No | Source | Revenue | | | Capital | | | | Recurrent | | |
| | | 20..... | 20... | 20..... | 20..... | 20..... | 20..... | 20..... | 20..... | 20..... | 20..... |
| | | N | N | N | N | N | N | N | | | |
| 1. | Fees | | | | | | | | | | |
| 2. | Grants | | | | | | | | | | |
| 3. | Donations/ Gifts | | | | | | | | | | |
| 4. | Library Dev. Fund | | | | | | | | | | |
| 5. | Endow- ments | | | | | | | | | | |
| | Others: Specify: | | | | | | | | | | |

13.2 REVENUE AND EXPENDITURE ESTIMATES FOR PROPOSED PROGRAMME

1.0 OWNERSHIP OF THE INSTITUTION

1.1 Name(s), address(es) and telephone numbers (Office and Home) of the proprietor(s)

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2.0 HEADSHIP OF THE INSTITUTION

2.1 Name of the Chairman Board Of Governing Council

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2.2 Qualifications of the Chairman . Please attach the Chiarman's curriculum vitae:

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NAME OF OFFICER(S) THAT COMPLETED THE FORM

DESIGNATION/RANK.....

ADDRESS

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SIGNATURE

OFFICIAL STAMP

DATE