## BOARD OF PRACTICAL TRAINING (EASTERN REGION), KOLKATA

An autonomous body under the

## Department of Higher Education, Ministry of Education, Government of India

2337-0750 E-Mail: inf@bopter.gov.in

2337-0751 Fax: (033) 2321-6814 Website: www.bopter.gov.in

REPORT FO	R INSPECTIO	N UNDER THE API	PRENTICE	S ACT, 1	<b>1961 FOR THE</b>	YEAR 20	20				
1.a) Date of Inspection:		Weekly (	Weekly Off:		Telephone	<b>:</b> :					
b) Date of Last Inspection:					Fax : Email:						
2 N 1	1.411	Website:	2 N	1							
2. Name and co	mpiete address o	of the establishment be	eing inspecte	ed:		3. Names and designations of the officers met during the inspection					
		5 Nove CCEO/COO AD /CM/SVM									
4. Name and de	signation of Trai	5. Name of CEO/COO/MD/GM/WM									
6.	Category of app	Apprentices to be engaged as per quota allocated for the year		Number of apprentices engaged till date	Number of contracts sent till date	Remarks					
	a) Graduate	Engineering									
Engagement of apprentices		Non-Engineering									
	b) Technician	Engineering									
7(i). Total Man	power Strength (	TMPS): Permanent:			Tota	al including all:					
(ii) Under Rule 7B(1) Total Man Power Strength (TMPS): (a) Less than 4 (Not eligible to engage)  (b) 4 to 29 (Eligible to engage but not obligatory) (c) 30 and above (Obligatory)											
		<u> </u>	(c) 30								
8. Whether Training Programme has been chalked out? Yes / No					9. a) Whether the Training Programme mentioned at 8 has been approved by the Board? Yes / No b) Date of approval:						
10. Whether record of work done by apprentice is maintained? Yes / No					11. Number of apprentices contacted. (Please give details on overleaf)						
12. Pendency of	f reimbursement	claim with Board's o	ffice.	13. Verification of the stipend per month being paid to the apprentices:  Graduate: Rs							
14. a) Guideline Workplace:	es for Skill Asses	ssment are being follo Yes / 1		14 b) Information regarding Soft-Skill Training Provided at Workplace: Yes / No							
	on regarding em	ployment of apprentic				ntices absorbed i					
Post Apprenticeship Permanent Employment (PAPE)					te	Technician					
module is updated on www.mhrdnats.gov.in Yes / No											
16. Any Memorandum of Understanding (MoU) signed with Academia for Apprenticeship/Internship:  Yes / No (If yes submit a copy)											
17. Remarks of the Apprenticeship Adviser :											
		med officers of the estable nended from time to time)									
		establishment that the inf									

Region); Kolkata in regard of the apprentices and related matters is factual and correct.

Received a copy of this report:

For Employer

Designation:

Signature:

Name:

Tel:

Seal of establishment

Deputy/Assistant Central Apprenticeship Adviser/ Officer On Special Duty (Training)

Signature:

**F17A** 

## DETAILS OF THE APPRENTICES CONTACTED BY THE APPRENTICESHIP ADVISER DURING HIS INSPECTION

(Refer Item No. 11 in the Inspection Report overleaf)

Sr. No.	Name of the apprentice	Category of apprentice [Graduate/ Technician]	Date of joining the apprentices hip training	Area in which training is being imparted at present (e.g. production, stores, R & D, etc.)	Soft Skills training provided at Workplace. (Yes/No)	Source from which the apprentice came to know about the apprenticeship training scheme	Feedback on the training	Signature of the apprentice

For employer

Signature