



Expression of Interest Form for Schools

Yes, our school is interested in being a part of the Inclusive Education Program.
We would like to... (Tick mark your preference)

Establish a CEC at our School Enroll our school for a CEC

School details:

Name of the School: _____

Affiliated Board: _____ Affiliate No. _____

Address: _____

City: _____ State: _____ Pin Code: _____

Phone: _____ Website: _____

Contact Person: _____

Designation: _____

Mobile No.: _____ Email ID: _____

Signature & Seal of authorize signatory

Name: _____

Date: _____

Note:

This page is NOT mandatory & can be left blank.
Please limit the detailing to NATIONAL LEVEL achievements only

School Achievements

Achievements from our school, worth talking about

Of the School: _____

Of our Teacher(s): _____

Of our Student(s): _____

By sending us a dully filled form via Courier or Registered Post to:



Institutional Excellence Forum

D90, Sector 30, Noida 201301
+91-9958050094

Kindly email us (info@iefglobal.org) a high resolution soft copy of **Your School's Logo & Photo of yours - the Principal of the school**