

INTERNATIONAL ASSOCIATION FOR THEOLOGICAL ACCREDITATION

(IATA)

ATLANTA - 30019
USA



KOLKATA - 732124
INDIA

Application Form for IATA Membership / Accreditation

NAME OF THE INSTITUTION:

POSTAL ADDRESS:

COUNTRY:

PHONE NO. WITH CODE:

MOBILE:

E.MAIL:

WEBSITE:

YEAR OF ESTABLISHMENT:

CHURCH AFFILIATION (IF ANY):

PRESENT MEMBERSHIP / AFFILIATION / RECOGNITION / ACCREDITATION

NAME AND PHONE NO. OF THE:

(a) Founder:

(b) Principal:

(c) Registrar:

(d) Dean:

(e) Administrator:

TOTAL TEACHING STAFF:

LIST OF THE FACULTY WITH THEIR QUALIFICATIONS (Use separate sheet):

TOTAL NO. OF NON-TEACHING STAFF:

TOTAL STRENGTH OF STUDENTS:

(a) Boarders: _____ (c) Male: _____

(b) Day Scholars: _____ (b) Female: _____

DEGREES OFFERED:

Do you have any distance education program?

LIBRARY:

(a) Total Titles:

(b) Total Periodicals:

(c) Do you have an internet Library:

LOCATION OF THE INSTITUTION:

(a) Panchayat

(b) Municipality

(c) Corporation

LAND AND BUILDING:

(a) own (b) Rental

(c) Land/Plot Measurement:

(d) Approximate Square Feet of the Buildings:

NEAREST AIRPORT:

AIRPORT TO THE INSTITUTION (DISTANCE IN KMS):

NEAREST RAILWAY STATION:

RLY. STN. TO THE INSTITUTION (DISTANCE IN KMS):

Please enclose:

(a) A photo of your main building, students and faculty.

(b) Copies of the application forms and prospectus.

(c) Use separate sheet for any helpful information.

Place:

Date:

Founder/President
(Signature with office seal)

For I.A.T.A. Office use only

Membership Granted On : _____

Accreditation Granted On : _____ For _____

Remarks: _____

Executive Director

International Director

National Chairman