

## SF 5.1E2: Trainers' profile

### Instructions for verification:

1. PIA OP team will verify the documents while selecting the trainers and a copy of the documents should be kept at the training centre
2. PIA Q team will check all the documents at the time of due diligence. Similarly details of the trainers who join the centre after the previous detailed inspection will be verified.
3. **Minimum qualifications for trainers**

Trainers under DDU-GKY should meet anyone of the two criteria given below:

- a. Eligibility criteria as prescribed by NCVT/SSC, if any
- or
- b. If the above is not fulfilled then they should meet the following:
  - i. They should have undergone the Training of Trainers (ToT) by domain expert master trainers
  - and
  - ii. Master trainer of the PIA should certify that the trainers are eligible to train candidates in the domain/non domain for which the trainer gives training.

However, SRLM for APS/CTSA for YPS have an option to appoint domain expert and assess the trainers. If the trainers do not qualify then the trainer will not be permitted to continue the training. If such cases repeat this will be considered as default.

4.

<b>Name of the PIA:</b>	
<b>Project code:</b>	
<b>Training centre:</b>	
<b>Trainer's profile</b>	
Name	
If Trainer, Domain (course)	

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If not the domain trainer or with additional skill	<input type="checkbox"/> Computer skills <input type="checkbox"/> Soft skills <input type="checkbox"/> English skills <input type="checkbox"/> Others		
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Others		
Date of Birth (dd/mm/yyyy)			
Category	<input type="checkbox"/> General <input type="checkbox"/> SC <input type="checkbox"/> ST <input type="checkbox"/> OBC		
Father's/Mother's/Husband's Name			
Physical Disability	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes	(please mention the category of disability)
Aadhaar no. (if any)			

## Education qualification

Education al qualificati on	Board/Univers ity	Subject	Year of passing	% of marks
10 <sup>th</sup>				
12 <sup>th</sup>				
Graduation (please specify)				
Post-graduation (please specify)				
Other qualificatio				

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n (please specify if any)				
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## Experience

(Latest 5 only from current to past)

Sl. No.	From (month & Year)	To (month & Year)	company Name	starting Designation	last designation	last salary drawn
1						
2						
3						
4						
5						

## Other information (if any)

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