



e-Kalyan

Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand

College(INO) Registration



e-Kalyan

Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand



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Candidate Login ➔

Candidate Registrations 👤+

College Registrations 🏫



Transferring data from testnew.cg.gov.in...

College(INO Registration)

The screenshot displays the e-Kalyan website interface. At the top, the browser address bar shows the URL <https://testnew.cgg.gov.in/ekalyan/>. The website header includes the e-Kalyan logo, the text "Department of Scheduled Tribe, Scheduled Caste, Minorities and Backward Class Welfare, Govt. of Jharkhand", and a navigation menu with "HOME", "PRE MATRIC NIYAMAVALI 2022", "SERVICES", and "REPORTS". A "Digital India Power To Empower" logo is also present. A modal window titled "College Registration" is centered on the screen, featuring two buttons: "College Registration (Within state)" and "College Registration (Outside state)". A "CLOSE" button is located at the bottom right of the modal. The background of the website shows a banner image of a group of schoolgirls in white uniforms, and a "Candidate Login" button is visible on the left side.

Institution Nodal Officer (INO) DemoAuth

Browser tabs: eKALYAN::Jharkand

Address bar: <https://testnew.cgg.gov.in/ekalyan/collRegistration.do?collType=pms>

Zoom: 80%



e-Kalyan

Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand



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(Note: Fields marked with * below are mandatory.)

College Registration Within State Institution Nodal Officer (INO) Details

| | |
|---|---|
| Institution Nodal Officer Aadhaar No * | <input type="text" value="7088"/> |
| Name in Aadhaar * | <input type="text" value="Amit Kumar"/> |
| Date Of Birth * | <input type="text"/> |
| Gender * | <input type="text" value="Male"/> |
| Aadhaar Linked Mobile No * | <input type="text"/> |
| <input type="button" value="VERIFY AADHAAR DETAILS"/> | |



e-Kalyan
Department of Scheduled Tribe, Scheduled Caste,
Minority and Backward Class

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System tray: 21°C Haze, Search, Taskbar icons (Windows, Edge, File Explorer, Mail, etc.), Language: ENG IN, Date: 26-01-2023, Time: 21:55



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(Note: Fields marked with * below are mandatory.)

College Registration Within State Institution Nodal Officer (INO) Details

testnew.cgg.gov.in

verifying ekyc

OK

| | |
|----------------------------|------|
| Gender * | Male |
| Aadhaar Linked Mobile No * | |

VERIFY AADHAAR DETAILS





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Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand



Go back

(Note: Fields marked with * below are mandatory.)

College Registration Within State Institution Node Identifier (INO) Details

testnew.cgg.gov.in

Aadhaar Details Matched Successfully

OK

| | |
|----------------------------|------|
| Gender * | Male |
| Aadhaar Linked Mobile No * | |

VERIFY AADHAAR DETAILS





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Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand



Go back

(Note: Fields marked with * below are mandatory.)

College Registration Within State Institution Nodal Officer (INO) Details

testnew.cgg.gov.in

OTP sent successfully to the entered mobile no.

Don't allow testnew.cgg.gov.in to prompt you again

OK

Aadhaar Linked Mobile No *

Enter OTP:



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Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand

SITE MAP

Home

REACH US

hel@deskekalvan.lal.cgg.gov.in



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(Note: Fields marked with * below are mandatory.)

College Registration Within State Institution Nodal Officer (INO) Details

| | |
|---|---|
| Institution Nodal Officer Aadhaar No * | <input type="text" value="88"/> |
| Name in Aadhaar * | <input type="text" value="Amit Kumar"/> |
| Date Of Birth * | <input type="text"/> |
| Gender * | <input type="text" value="Male"/> |
| Aadhaar Linked Mobile No * | <input type="text"/> |
| Enter OTP: | <input type="text" value="502418"/> |
|  <input type="button" value="VERIFY OTP DETAILS"/> | |

Colleges/Institutions Within State Registration Form

**FOR ADDING INSTITUTION FOR POST MATRIC SCHOLARSHIP
(APPLICABLE FOR THOSE COLLEGES/INSTITUTIONS WHICH ARE NOT LISTED ON PORTAL FOR 2022-23)**

(NOTE : Before requesting for adding your institution for POST MATRIC SCHOLARSHIP for the current Academic year (2022-23), you must read carefully and understand all the terms and conditions mentioned below before requesting)

1. Documents required are mentioned below :

I. Affiliation certificate

II. College/Institution Registration certificate

III. Course Registration certificate

IV. Course Fee Structure

V. Other Relevant Documents

VI. Letter Head by Principal / Head / Dean

(letter head of the institution bearing mobile no., signature and full name of the Dean or Principal or Head, of the concerned institution)

2. Terms & Conditions

I. An Institution can request only once for an academic year, No editing or modification option will be given

II. All the Documents required above must be :

a. Clearly visible & readable

b. Valid for Current academic year (2022-23)

c. Issued by Competent issuing authority with duly signed and stamped

d. Complete set of Papers(must have all the pages of the document) with forwarding letter (addressed to the institution) issued and signed by issuing authority

e. Color scanned copy of the original in PDF format, maximum size upto 5MB each

f. Attached in their respective fields only, mismatching will causing rejection of request

III. Requested will be rejected if any incorrect/ invalid/ improper document/ information found.

IV. If required, Original documents may be requested to present to the committee

(If college not registered earlier in our online portal)

(Note:Fields marked with * below are mandatory.)

Institution Details

| | | | |
|--|--|---------------------------------|---|
| Name Of the Institutions * | <input type="text" value="Test"/> | | |
| Type of the Institutions: * | <input type="text" value="Central Govt"/> | | |
| Affiliation Authority Name: * | <input type="text" value="Test"/> | Affiliation Authority Nature: * | <input type="text" value="GOVERNMENT"/> |
| Affiliation Letter No: * | <input type="text" value="1234"/> | Affiliation Validity Period: * | <input type="text" value="2024"/> |
| Institution Registration Code : * | <input type="text" value="2345"/> <small>College AISHE Code or Registration Number: Find AISHE Code</small> | Registration Authority Name: * | <input type="text" value="HRD"/> |
| Registration Certificate No: * | <input type="text" value="01"/> | | |
| Course Registration Certificate Ref. No: * | <input type="text" value="02"/> | Year of Establishment: * | <input type="text" value="2000"/> |
| Principal's /Heads/ Dean's Name: * | <input type="text" value="Test"/> | | |
| Complete Address Of the Institution * | <input type="text" value="Test"/> | | |
| State *: * | <input type="text" value="Jharkhand"/> | | |
| District *: * | <input type="text" value="Ranchi"/> | Block : | <input type="text" value="Angara"/> |
| Pin Code *: * | <input type="text" value="834001"/> | | |
| College Mobile No: * | <input type="text" value=""/> | College Email Id: * | <input type="text" value="gov.in"/> |
| Latitude: * | <input type="text" value="23.3441"/> | | |
| Longitude: * | <input type="text" value="85.3096"/> | | |

PROCEED TO UPLOAD DOCUMENTS

Note:Fields marked with * below are mandatory.)

Institution Details

| | | | |
|--|---|---------------------------------|---|
| Name Of the Institutions * | <input type="text" value="Test"/> | | |
| Type of the Institutions: * | <input type="text" value="Central Govt"/> | | |
| Affiliation Authority Name: * | <input type="text" value="Test"/> | Affiliation Authority Nature: * | <input type="text" value="GOVERNMENT"/> |
| Affiliation Letter No: * | <input type="text" value="1234"/> | Affiliation Validity Period: * | <input type="text" value="2024"/> |
| Institution Registration Code : * | <input type="text" value="2345"/> | Registration Authority Name: * | <input type="text" value="HRD"/> |
| Registration Certificate No | <input type="text"/> | | |
| Course Registration Certificate No | <input type="text"/> | | |
| Principal's /Heads/ Dean's Name | <input type="text"/> | | |
| Complete Address Of the Institution | <input type="text"/> | | |
| State * | <input type="text" value="Jharkhand"/> | | |
| District * | <input type="text" value="Ranchi"/> | Block : | <input type="text" value="Angara"/> |
| Pin Code * | <input type="text" value="834001"/> | | |
| College Mobile No: * | <input type="text"/> | College Email Id: * | <input type="text" value="gov.in"/> |
| Latitude: * | <input type="text" value="23.3441"/> | | |
| Longitude: * | <input type="text" value="85.3096"/> | | |
| <input type="button" value="PROCEED TO UPLOAD DOCUMENTS"/> | | | |

 testnew.cgg.gov.in

Are you sure have you read all the terms and conditions and proceed to upload documents

OK

Cancel

Upload Details

Note: Affiliation/Registration Certificate from (AICTE,UGC etc.) (Must be valid from Current Academic Year 2022-23)

(Note:Upload scanned documents in pdf / jpg formats only.)

| | |
|---|---|
| Institution Affiliation Certificate: * | Browse... documents.pdf |
| College/Institution Registration Certificate: * | Browse... documents.pdf |
| Course Registration Certificate: * | Browse... documents.pdf |
| Course Fee Structure: * | Browse... documents.pdf |
| Is the College NAAC Approved : * | Yes : <input type="radio"/> No : <input checked="" type="radio"/> |
| College Geo Tagging Image: * | Browse... documents.pdf |
| College Hostel Geo Tagging Image: * | Browse... documents.pdf |
| Other Relevant Documents: | Browse... documents.pdf |
| Letter Head by Principal / Head / Dean: * (letter head of the institution bearing coll/inst mobile no, signature and full name of the Dean or Principal or Head, of the concerned institution) | Browse... documents.pdf |

[CLICK HERE FOR SAMPLE FORMAT](#)

Declaration

I accept that all the information mentioned and attached above are true in best of my knowledge,any legal action may be take if found incorrect.

| | | | |
|---|-------------------------|--------------------------|------------------------------|
| Name of the Declarant: * | Amit Kumar | Declarant Designation: * | test |
| Declarant Mobile No: * | <input type="text"/> | Declarant Email ID: * | <input type="text"/> @gov.in |
| Signature of Institutions Head / Declarant with Seal: | Browse... documents.pdf | | |

(Note:Fields marked with * above are mandatory.)

104618



Enter Captcha:

[GET OTP](#)

Note: Affiliation/Registration Certificate from (AICTE,UGC etc.) (Must be valid from Current Academic Year 2022-23)

(Note:Upload scanned documents in pdf / jpg formats only.)

| | |
|---|---|
| Institution Affiliation Certificate: * | <input type="text" value="documents.pdf"/> |
| College/Institution Registration Certificate: * | <input type="text" value="documents.pdf"/> |
| Course Registration Certificate: * | <input type="text" value="documents.pdf"/> |
| Course Fee Structure: * | <input type="text" value="documents.pdf"/> |
| Is the College NAAC Approved : * | Yes <input checked="" type="radio"/> No <input type="radio"/> |
| NAAC Grade: * | <input type="text" value="A+"/> |
| NAAC Accreditation Certificate: * | <input type="text" value="documents.pdf"/> |
| NAAC Validity Date: * | <input type="text" value="01/01/2025"/> |
| College Geo Tagging Image: * | <input type="text" value="documents.pdf"/> |
| College Hostel Geo Tagging Image: * | <input type="text" value="documents.pdf"/> |
| Other Relevant Documents: | <input type="text" value="documents.pdf"/> |
| Letter Head by Principal / Head / Dean: * (letter head of the institution bearing coll/inst mobile no, signature and full name of the Dean or Principal or Head, of the concerned institution) CLICK HERE FOR SAMPLE FORMAT | <input type="text" value="documents.pdf"/> |

Declaration

I accept that all the information mentioned and attached above are true in best of my knowledge,any legal action may be take if found incorrect.

| | | | |
|---|--|--------------------------|-------------------------------------|
| Name of the Declarant: * | <input type="text" value="Amit Kumar"/> | Declarant Designation: * | <input type="text" value="test"/> |
| Declarant Mobile No: * | <input type="text" value=""/> | Declarant Email ID: * | <input type="text" value="gov.in"/> |
| Signature of Institutions Head / Declarant with Seal: | <input type="text" value="documents.pdf"/> | | |

(Note:Fields marked with * above are mandatory.)

| | |
|-------------------------|-------------------------------------|
| 104618 | <input type="text" value="104618"/> |
| GET OTP | |

| | | |
|---|--|---|
| Is the College NAAC Approved : * | | Yes : <input checked="" type="radio"/> No : <input type="radio"/> |
| NAAC Grade: * | <input type="text" value="A+"/> | |
| NAAC Accreditation Certificate: * | <input type="text" value="Browse... documents.pdf"/> | |
| NAAC Validity Date: * | <input type="text" value="01/01/2025"/> | |
| College Geo Tagging Image: * | | <input type="text" value="Browse... documents.pdf"/> |
| College Hostel Geo Tagging Image: * | | <input type="text" value="Browse... documents.pdf"/> |
| Other Relevant Documents: | | <input type="text" value="Browse... documents.pdf"/> |
| Letter Head by Principal / Head / Dean: * (letter head of the institution bearing coll/inst mobile no, signature and full name of the Dean or Principal or Head, of the concerned institution) | | <input type="text" value="Browse... documents.pdf"/> |
| <input type="button" value="CLICK HERE FOR SAMPLE FORMAT"/> | | |

Declaration

I accept that all the information mentioned and attached above are true in best of my knowledge, any legal action may be take if found incorrect.

| | | | |
|---|--|--------------------------|-------------------------------------|
| Name of the Declarant: * | <input type="text" value="Amit Kumar"/> | Declarant Designation: * | <input type="text" value="test"/> |
| Declarant Mobile No: * | <input type="text" value="Auto-Populate"/> | Declarant Email ID: * | <input type="text" value="gov.in"/> |
| Signature of Institutions Head / Declarant with Seal: | <input type="text" value="Browse... documents.pdf"/> | | |

(Note: Fields marked with * above are mandatory.)

| | |
|-------------------------------------|--|
| <input type="text" value="104618"/> | <input type="text" value="Enter Captcha: 104618"/> |
| Enter INO Mobile OTP: | <input type="text" value="52645"/> |
| Enter College Email OTP: | <input type="text" value="467377"/> |

Is the College NAAC Approved : *

Yes : No :

NAAC Grade: *

A+

NAAC Accreditation Certificate: *

Browse... documents.pdf

NAAC Validity Date: *

01/01/2025

College Geo Tagging Image: *

Browse... documents.pdf

College Hostel Geo Tagging Image: *

Browse... documents.pdf

Other Relevant Documents:

Browse... documents.pdf

Letter Head by Principal
(letter head of the institution)
full name of the Declarant

CLICK HERE

 testnew.cgg.gov.in

Are you sure your college is not registered earlier in our online portal?
Do you want to submit form now?

OK

Cancel

Declaration

I accept that all the information provided is true and correct.

Name of the Declarant

Declarant Mobile No

Signature of Institutions Head / Declarant with Seal:

Browse... documents.pdf

(Note: Fields marked with * above are mandatory.)

104618



Enter Captcha: 104618

Enter INO Mobile OTP:

52645

Enter College Email OTP:

467377

SUBMIT REQUEST



e-Kalyan

Department of Scheduled Tribe, Scheduled Caste, Minority and Backward Class Welfare, Govt. of Jharkhand



Go back

- me
- ☰
- ✂
- 🔄
- ⚠

Institution details are submitted successfully and reference no is 7070



e-Kalyan
Department of Scheduled Tribe, Scheduled Caste,
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Welfare, Govt. of Jharkhand

SITE MAP

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- ✉ helpdeskekalyan[at]cgg[dot]gov[dot]in
- ☎ Off-: 040-23120591, 040-23120592, 040-23120593