



Salary Book

MCI EDUCATIONAL GROUP

RUN UNDER CHANDRASHEKHAR & NARAYAN EDUCATIONAL TRUST

MCI CAMPUS: Vandana Cinema Road, Opp. Hotel Gulmarg, Quamruddin Ganj, Bihar Sharif, Nalanda - 803101

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CHANDRASHEKHAR & NARAYAN

EDUCATIONAL TRUST

AUTHORISED TRUST SEAL

CLIENT INFORMATION AND SERVICE AGREEMENT

Agreement No.: _____ Date: ____/____/____	Place: _____
Client/Applicant Name: _____	Father/Spouse Name: _____
Firm/Institution Name: _____	Use: Personal [] Commercial [] Institutional []
Mobile: _____ Email: _____	ID Type: _____ Last 4 digits: _____
Residential Address: _____	
Business/Work Address: _____	
PAN/GST/Registration (if applicable): _____	Website/Domain/User ID: _____
Product/Service/Approved Scope: _____	
Total Fee: Rs. _____ Advance: Rs. _____ Balance: Rs. _____	Delivery/Duration: _____

Service: Staff GPS/photo attendance, payroll and institution management. These terms, the accepted quotation/scope sheet and payment receipts together form this Agreement.

TERMS AND CONSENT

1. The employer shall clearly notify staff of data collection and ensure the required consent or lawful basis.
2. The Client/employer is responsible for wages, deductions, leave, working hours and labour-law compliance.
3. GPS and photographs shall be used only for attendance; access and confidentiality must be controlled by the Client.
4. The Client is responsible for losses caused by wrong settings, incorrect entries, unauthorised access or missing backups.
5. Both parties shall use confidential and personal data only for this Agreement and apply reasonable access, retention and disposal safeguards.
6. Disputes shall first be addressed through written mutual resolution; otherwise competent courts at Bihar Sharif, Nalanda shall have jurisdiction.

DECLARATION: I confirm that the information above is correct and that the scope, fees, limitations, responsibilities and prohibited uses have been explained to me. I accept responsibility for lawful use, supplied content, required user/employee consent and regulatory compliance.

CLIENT / GUARDIAN / AUTHORISED PERSON	AUTHORISED REPRESENTATIVE - Salary Book
Signature: _____	Signature: _____
Name: _____	Name: _____
Date: _____ Client Seal: _____	Date: _____ Institution Seal: _____