# **Format for Academic Audit**

Period:	Jan.	to D	ec. 20	16
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Centre:				
School:				
Name of the Dean:				
Name of the Head:				
No. of Sanctioned Posts (Faculty)	Professor:	 Associate Professor:	 Assistant Professor:	
No. of Vacant Positions (Faculty)	Professor:	 Associate Professor:	 Assistant Professor:	
No. of Sanctioned Post (Support Staff):				
No. of Vacant Post (Support Staff):				

Please attach all the supporting documents as enclosures duly numbered. The enclosure number may be mentioned against the concerned table.

### A. Faculty Details (Add additional rows as required)

S. No	Name of the Faculty Member	Qualification	Type (Regular / Contract/Temporary/Guest /FRP/etc)	Duration of Employment (between 01/01/2016 and 31/12/2016)	Courses Taught
1			,		
2					
3					
4					
5					
6					
7			_	_	

# B. Courses Offered (Add additional rows as required)

Program	Semester	Course Name	Course Code	Credits	Faculty Name	No. o	f Sessions Taken*
					-	Lecture	Practical
	January 2016 – May 2016						
				July 2016 - Decer	nber 2016		

<sup>\*</sup> The number of sessions should be as per the actual taken by the faculty (Enclose copy of the attendance sheet)

**Note**: In case of courses taken by more than one faculty member, the no. of sessions may be entered as per the attendance statement.

### C. Batch wise Student details (Integrated / PG Program)

	Batch of 2012 (Year V)	Batch of 2013 (Year IV)	Batch of 2014 (Year III)	Batch of 2015 (Year II)	Batch of 2016 (Year I)
No. of Students					

#### D. Ph D Student Details

Name of the Student	Supervisor Name	Topic of Research	Type of Fellowship (UGC/RGNF/MANF/University/etc)	NET Qualified (Yes / No)

E. Faculty Wise Ph D Guidan	CE
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Name of the Faculty	No. of Students pursuing Ph D	No. of Students submitted Thesis	Total

### F. Physical Infrastructure

	Number of Rooms	Room No. (details of location, etc)
Head		
Faculty Room		
Class room		
Laboratory		

# G. Teaching Aids (in classroom) (please add additional rows for other equipment, if any)

Type of Equipment	Number	Current Status (Working /Under Repair/Scrap)
Smart Boards		
LCD Projectors		
White Board		
Green Board		

### H. Laboratory Details (Please add additional rows as required) (include Teaching Labs and Research Labs)

Laboratory Room No	Equipment Details	Current Status Current Status (Working /Under Repair/Scrap)

### I. Financial Assistance (January to December 2016)

Extra Mural Research	Total number	Total fund	University funding to Centre	Total fund given by University	Fund Utilized
Projects			for Teaching Labs		
Approved					
Sanctioned					
Total					
Documentation proof (Enclosu	re no.):				

#### J. Student – Teacher Ratio

Period	Total Number of students in the Centre (Please do not include Ph D students)	Total Number of Faculty (Full time faculty including contractual /temporary)	Student Teacher Ratio
January – May 2016			
July – December 2016			

### K. Faculty Development Activities (summary report for the Centre from January to December 2016)

Number of quality improvement programmes (Orientation/ Refreshers/ Short duration courses/ etc.)	Number of faculty development programme	Seminar/ Conference/ Workshop	Financial support for attending workshop/ seminar (mention the source	Numbers of Publication	Projects Sponsored	Consultancy	No. of Patents

#### L. Involvement in Exams

Faculty Name	Question paper prepared in (Even/ Odd) End Sem Exams (consider two sets as one)	papers evaluated during (Even/ Odd) End Sem examination	Total hours involved (as per UGC Amendment 4):

### M. Administrative responsibilities (include additional rows as required) (Include membership in committees)

Faculty Name	Mention the Role and activities (Dean / Head / Chairman/ Member etc.)	No. of Hours spend for the activity	Total hours involved (as per UGC Amendment 4):

N. Name of Journals where faculty is reviewer / editor / member of editorial board / etc (include additional rows as required)

Name of the Faculty	Name of the Journal	Role in the Journal

#### O. Student Placement / Higher Studies Details

	Number	Students Placed	Higher Studies
Students passed out after UG			
Students passed out after PG			

#### P. Academic Bodies of the University

Name of the Body	Constituted on	Date of the Meetings (Between Jan – Dec 2016)
Board of Studies		
School Board		
Doctoral Committees		

Enclose copy of the members notified by the University and the copy of the minutes of the meetings

Q. Agenda in Board of Research Studies / Academic Council / Executive Council / etc

Name of the Body	Agenda Item No and Details	Status of the Agenda
Board of Research Studies		
Academic Council		
Executive Council		

### R. Syllabus Approval (

Program (Integrated / PG / UG / Ph D / etc)	Agenda Item No and Meeting No. of Academic Council	Copy of the Minutes of approval of syllabus

T. SWOT Analysis	
Strengths	Weakness
U. Requirements of the Centre	
Office Staff Requirements	Laboratory Staff Requirements
V. Future Plans	

S. Do you have a hard copy of the approved syllabus with modification from time to time duly stamped by the office of Registrar / Controller of Examinations (Yes / No)