

UG Courses

TELANGANA UNIVERSITY, DICHPALLY, NIZAMABAD – 503 322

FORMAT FOR SUBMISSION OF INFORMATION TO THE INSPECTION COMMITTEE : 2017-18

DD. No..... Date..... Amount Rs.20000/-_

 \checkmark Whether compliance report submitted for the academic year 2016-17

1.	Name of the College with complete postal address	
	Tel. No. :	
	Mobile No. :	
	Mail ID :	
1	Whether the college is accredited	Yes / No
ĺ	by NAAC	If Yes, Grade :
	Whether the college has 2(f) 12(B) status	Yes / No
	Whether the college is running in the same premises as mentioned in permission letter	
2.	Year of establishment	
3.	College Code No.	
	Name of the Society	
4.	Name of the Secretary/	
	Correspondent with mobile No. (Copy of the byelaws to be enclosed)	
ĺ	Whether the college is running by	
	the same society (as per the college sanctioned orders)	If no, (Permission for change of society to be enclosed)
5.	APSCHE / Govt. permission Lr.No.	No.
	and date, for starting of UG College	
	(Copy to be enclosed)	
6.	Nature of the College	1. Govt./Aided/Unaided :
		2. Women/Co-Education :
		 Minority / Non-Minority: (in case of minority, minority status certificate to be enclosed)
7.	Whether the college is running PG	Yes / No
	courses along with UG courses	Yes / No If Yes, whether concerned subject in UG is offered in the college

8.	Latest TU affiliation orders number/date for all the UG & (PG		UG						
c I	courses if any) (Copies to be enclosed)			PG					
9.	Corpus Fund Details (Copies to be enclosed)		F	DR No.			Rs.	Date of Maturity	
10		-1							
10	Name of the Princip								
	Whether Appoir Selection Committe	nted through e:					Yes / N	0	
11	University nominee (Copy to be enclose	ad)		ning body	/				
		,	Select Comm						
			Date o	of					
	Number of Governi	ng Body	nomin 1.	lation					
	meetings conducted during Last		2.						
	Year (mention the dates)			3.					
12.	Nature of accommo	dation (Copies of	f ownership/Lease deed to be enclosed)						
ĺ	 ✓ Own or Leased premises 		Own / Leased						
ĺ	If lease	period	Years / from to						
	Type of accommodation	RCC roof / sheds	(Room wise dimensions floor wise to be enclosed)					por wise to be enclosed)	
Į			ding or multiple buildings Single / Multiple					Itiple	
ļ	If running in more than (copies to be enclosed)		No. of Buildings :						
	Complete address with I	D.No.	Lease No.	deed		Term		From - to	
6									

13.	Land Details (Copy to be enclosed)	Document No.				
	(Copy to be enclosed)	Area				
		Location				
14.	Any other courses / Colleges functioning in the same premises (like junior college etc.).	Yes / No (If yes, details to be furnished along with the permission letter from the competent authority) NCC wing Yes / No				
15.	Extra Activities	NCC wing	Yes / No			
		NSS wing	Yes / No			
	Details of Games / Sports / Cultural Activities, if any					
	Whether the college has	Yes / No				
	placement cell	If yes, details of	placements made			
	Details of the Ragging Cases (Enclose copy of the Committee constituted)					
16.	Basic Amenities	Principal Room	Available / Not available			
		Staff Room	Available / Not available			
		Library / Reading Room	Available / Not available			
		Girls waiting room	Available / Not available			

17.	Course particulars (Separate sheet to be enclosed as per the format given below)										
			Under Gradu	ate							
	S.No.	Course/Combination	Sanctioned intake	Medium	10 seats enhancement (if any)						
			Post Gradua	nte							
			Other courses,	if any							
		1									

18.	No. of teachers of subject wise teacher	Appointed Selection Co	through mmittee	Appointed	by the Management (Adhoc)	
	the statement shown	t to be enclosed as per below)				
19.	Library facilities	available in the	No. of Book	S		
	college		No. of titles			
	(subject wise number o be given separately)	f titles and Volumes is to	No. of Volum	nes		
			No. of Bo during 2016	-17		
			Amount spe 2016-17	nt during		
20.	Labo	ratory facilities av	ailable in t	he college	(Bills to be en	closed)
	Subject	No. of labs	Major equip	ment available		ment procured during and amount spent
21.	Other basic ame	enities	Play ground		Available	/ Not available
			Fire Safety		Available	/ Not available
			Parking facility		Available	/ Not available
22	No. of admissions (combination wise) during the academic year 2016-17 (use separate sheet, if		Cours		anctioned strength	Admitted strength
				(i) (ii)		
	required)		P.Com			
			B.Com	(i)		
				(ii)		
			B.Sc.	(i)		
				(ii)		

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14	(1)
2.)	

	Course	No. of candidates appeared	No. of candidates passed	% of pass
Result	B.A			
Analysis	B.Com			
	B.Sc.			

(ii)

		SC		ST	ST BC		C Minority		rity	OC	
Course	Gender	Appeared	Passed	Appeared	Passed	Appeared	Passed	Appeared	Passed	Appeared	Passed
ВА	Male										
DA	Female										
B.Com	Male										
B.Com	Female										
D So	Male										
B.Sc.	Female										

PROFORMA FOR PARTICULARS OF PRINCIPAL AND TEACHING STAFF (Separate sheet to be enclosed for tables "i, ii, iii & iv")

24 (i)

SI. No.	Name of the Teaching Faculty	Designation	Qualification	Date of Appointment	Type of Employment – Regular/Adhoc/ Contract	Pan Card No.	Aadhar Number	IFS Code of the Salary A/c	Account No.	Mobile No.

(ii)

DEPARTMENT WISE COMPOSITION OF TEACHING STAFF									
Name of the Department	Regular Staff (Full Time)	Non Regularized Staff (Full Time)	Part Time Lecturer						

(iii)

WORK LOAD AND ACTUAL TEACHING HOURS PERFORMED (PER WEEK) Name of the Department Regular Staff (Full Time) Non Regularized Staff (Full Time) Part Time Lecturer Image: Colspan="2">Image: Colspan="2" Image: Colspan="2" I

(iv)

	STAFF STATUS FOR THE ACADEMIC YEAR 2016-17										
SI. No.	Course Name	No. of Sections	Medium	Required teaching staff as per norms	Presently available teaching staff	Difference					
1											
2											

DECLARATION

We hereby, declare that the information furnished in the application is correct and we are liable for any disciplinary action, if found otherwise. Further, we undertake to provide the required Accommodation / Laboratories and other necessary infrastructure required for UG College as per the Telangana University norms.

() Signature of the Principal with name and seal

() Signature of the Secretary/Correspondent with name and seal

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