



Guru Gobind Singh Indraprastha University
Kashmere Gate, Delhi - 110403

NOTICE

Instructions for existing affiliated institutions of session 2008-09 for Joint Assessment / Assessment for consideration of NOC by the Govt. and affiliation by the University for Academic session 2009-10

Details/documents (Sl.No.1 to 10) in respect of undertaking, declaration, endowment fund, performance and placement of students, lab status, library status, teaching and non-teaching faculty may be downloaded, however, hard copy of these has already been made available to all institutes in the month of January, 2009.

These documents attested and complete in all respects by the authorized signatory of the society/trust and Director/Principal in case of existing institutions of academic session 2008-09 be handed over to conveners of joint assessment committees / assessment committees at the time of their inspections for session 2009-10.

The information may be submitted programme wise however, in case of sharing the academic facilities, it should be clearly indicated. The University shall view seriously wherever above requirements are unfulfilled. The assessment proforma is also uploaded for convenience.

This issues with the approval of the Competent Authority.

Joint Registrar (Affiliation)

**For All Institutes/ Colleges which propose to apply for grant / revalidation
of NOC and grant/continuation of provisional affiliation
for academic session 2009-10**

UNDERTAKING

*(to be submitted by authorized signatory of the registered Society/Trust/Govt. Body
and Director/Principal in case of existing institute)*

*I (Name of the Director/Principal) Director/Principal of (Name of the
institute) hereby undertake to comply with all the conditions indicated by the
University at the time of grant / continuation of provisional affiliation, Statutory
Body while according approval and State Government while issuing No Objection
Certificate for the academic session 2009-10 along with other conditions imposed
from time to time throughout the year by them.*

Signature:
Chairman/ Secretary of the Society/Trust
Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

(The Undertaking should be submitted on a non-judicial stamp paper of Rs.10/-)

- Kindly read the enclosed proformas / formats carefully and provide the information as per existing status. Also please see that all the Annexures / Papers / Documents bearing information provided by you are duly signed and attested. (Please verify with the originals if photocopies are being enclosed).
- Please ensure that all information / detail provided by you is authentic and verifiable. In case of wrong or incomplete information, the institute will be liable to own demerits, therefore furnish us with the latest / correct information specially in respect of the status of teaching/non-teaching staff, library, labs, computer centre, infrastructure, etc.
- Do not hesitate to use additional sheets wherever required but also do not furnish irrelevant papers / enclosure to substantiate your information.

(On Letter Head of the Institute/College)

Declaration

I (Name of the Authorized signatory of the registered Society/Trust/Govt. Body in case of new institute) (Name of the Director/Principal in case of existing institute) of (Name of the Institute) declare that the information provided above is true to the best of my knowledge and I have not attempted to suppress or exaggerate data concerning this institution.

Signature:
Chairman/ Secretary of the Society/Trust
Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

Status of Endowment Fund created by the institute in case of programmes where it is not submitted to the statutory body

Sl.No.	Programmes	Details of Endowment Fund (indicates Date, Amount, Bank and joint FDR number)		
		1 st Installment	2 nd Installment	3 rd Installment

(Please enclose attested photocopies of the indicated installments)

Signature:
Chairman/ Secretary of the Society/Trust
Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

Performance and Placement of Students in the past years

Kindly provide details in the following format in respect of student performance, admitted to various batches at your institute from its inception programme-wise.

Performance Sheet

Batch-wise details (mention the batch/year of admission of students)

Semester-wise performance	Unsuccessful	Detained	Second Class	First Class	First with distinction	Exemplary performance
1 st Sem.						
2 nd Sem.						
3 rd Sem.						

- Past Record – Year-wise details of any other extra curricular achievements of students like debates, quizzes, competitions and other academic activities which have been taken up / attended by students (seminars, workshops, conference, Group Discussions).
- Details of student association (Duties/Privileges)
- Nature of Discipline maintained by students of the college
- Events Identified for the year & plan of implementation (academic events, sports, other co-curricular activities)

Signature:
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Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

Lab Status
(To be provided programme-wise)
as per status of 2008-09

Sl.No.	Name of the programme	Details of equipments available in the existing labs		
		1 st year	2 nd year	3 rd year

(Please use it as a sample and utilize it as per the programme conducted.)

Signature:

Chairman/ Secretary of the Society/Trust

Name:

Designation:

Dated:

Seal of the Society:

Signature:

Director/Principal of the Institute

Name:

Designation:

Dated:

Seal of the Institute :

Status of Computer Lab
(To be provided programme-wise)
as per status of 2008-09

Sl.No.	Programmes	Number and configuration of the existing terminals	Available Software	Quantity and Quality of Peripherals

N.B.: Please also indicate additional facility to be created in case a new programme/ additional programme is proposed for 2009-10.

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Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

LIBRARY STATUS

Comparative Status		2006-07	2007-08	2008-09
Titles (in numbers)				
References (in numbers)				
Total Books (in numbers)				
Journals (in numbers)	National			
	International			
Magazines				

1. Book Bank (whether available or Not) - YES/NO
2. Library Computerized / automated or not - YES/NO
3. Access to Electronic resources by Students/ Faculty (whether available or Not) - YES/NO
4. If Yes (indicate nos.)
 - (a) Journals
 - National -
 - International -
 - (b) Networked databases -
5. Whether online reservation of books available or not. - YES/NO

Signature:

Chairman/ Secretary of the Society/Trust

Name:

Designation:

Dated:

Seal of the Society:

Signature:

Director/Principal of the Institute

Name:

Designation:

Dated:

Seal of the Institute :

Profile of the Director/Principal/Approved/Recognized/Regular/Guest/Visiting Faculty /Non-teaching Staff

S. N	Name of the Director/Principal/Faculty	Date of Birth	Present Designation	Pay Scale	Total Emoluments (including all admissible allowances)	Percentage / Division (Last Exam)	Experience (in years)	Status of Approval/Recognition by University in case of Principal/Director/Faculty		
								Date	Discipline	Designation
1.										
2.										

N.B.:- Kindly use this format for sending the profile of your faculty members programme-wise.

Signature:
Chairman/ Secretary of the Society/Trust
Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

Details of Academic and Professional Qualifications of Faculty Members (including Guest / Visiting) working at (Name of the Institute) for session 2008-09 and identified for 2009-10

Name of the faculty	Academic/Professional Qualification (Graduation onwards)	Subject	Division	Percentage	Year of Passing	University	Status 2008-09	Identified for 2009-10
Dr. Nisha*	B.Tech							
	M.Tech.							
	Ph.D.	Mention the title of thesis						
Dr. Neha*	B.Sc.							
	M.Sc.							
	M.Phil							
	NET/GATE Qualified			Indicate percentile				

Kindly use the format for giving the academic / professional qualifications of all the regular / visiting / guest faculty functioning at your institute. Columns / Rows may be increased as per requirement. *These are just examples.

Signature:
Chairman/ Secretary of the Society/Trust
Name:
Designation:
Dated:
Seal of the Society:

Signature:
Director/Principal of the Institute
Name:
Designation:
Dated:
Seal of the Institute :

Details of Academic and Professional Qualifications of Faculty Members (including Guest / Visiting) and Non-teaching staff working at (Name of the Institute) for session 2008-09 and continue/identified for session 2009-10

Name of the faculty (Mention the status if Approved / Qualified / Recognized by the University)	Academic/Professional Qualification (Graduation onwards)	Subject	Division	Percentage	Year of Passing/Award of Degree	University
Dr. Nisha*	B.Tech					
	M.Tech.					
	Ph.D.	Mention the title of thesis				
	Any other					
	Experience					
	Achievements					
Dr. Neha*	B.Sc.					
	M.Sc.					
	M.Phil					
	NET/GATE Qualified			Indicate percentile		

Kindly use the format for giving the academic / professional qualifications of all the regular / visiting / guest faculty/ non-teaching staff functioning at your institute. Columns / Rows may be increased as per requirement. *These are just examples.

Achievements: In this column faculty may detail about consultancy work undertaken by the faculty besides participation in faculty development programmes / workshops / seminars and also mention about the publications / paper presentation / project / fellowship / award granted by government organization (if any).

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