PROFILE OF THE APPLICANT (FOR DEEMED TO BE UNIVERSITY STATUS)

1.	Name	and Address of the Applicant (Institution/Society/Trust/Others)
	Name.	:
	Addre	ss :
		Pin Code
		STD CodeFax No
		Phone No:
		E-Mail:
		Web Site:
2.	Propos	sed Name of the Deemed to be University:
3.	Type o	of Applicant: State Govt.(Declared Autonomous) Govt. Aided
		Self Financing University Deptt. Private
4.		er a resolution showing the consent of the Society/Trust for starting the ed to be University has been passed (a copy of the same is required to be tted)
		Yes No (Encl No)
5.	Detail	s of the Applicant (Institution/Society/Trust/Others)
	i)	Institution Society Trust
		Others (Please Specify)
	ii)	Registration Number :
	iii)	Date of Registration :
	iv)	Place of Registration :
	v)	Registered Under which Act: Society Act Trust Act (Please tick) (Please attach copy of Registration of Society/Trust) (Encl No)

Proforma-II

PROFORMA FOR SUBMITING INFORMATION REGARDING THE INSTITUTION FOR GRANT OF NO OBJECTION CERTIFICATE (NOC) FOR DEEMED TO BE UNIVERSITY STATUS BY THE STATE GOVERNMENT

(To be submitted along with two copies of the proposal in format as prescribed by UGC for grant of deemed to be University status)

- Note:-1. Please attach documentary proofs in the form of enclosures for the information furnished in this proforma.
 - 2. Attach separate sheets, if required.
 - 1. Name of the Institution:
 - 2. The Name of University to which the Courses running at present are affiliated:

S.No.	Name of the Course/ Degree	Year of start of the Course	Name of University to which affiliated	Enclosure number

- 3. Year of Establishment of the Institution: (Enclosure number......)
- 4. No of years from which the Institution has academic autonomy: (Enclosure number.....)
- 5. Details of Research Work/Consultancy/Project Work undertaken:

S. No.	Name of research Work/Consultancy / Project Work	Name of Project coordinator with designation, experience and qualification	Agency entrusted the Work	Year and Duration	Enclosure number

6. Details of Courses running in the Institution:

S.No.	Name of Course/ Degree	Branch	Is Course approved by the statuary body and its Name	Year of approval and validity	Enclosure number

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/	Lietaile of	A coreditation of	Ources	running	in the	Inctitution	•
/ .	Details of	Accreditation of	Courses	rumme	III till	msutunon	

S.No.	Name of Course/ Degree	Branch	Is Course accredited by the competent body and its Name	Year of accreditation and validity	Enclosure number

8. Academic Performance Record during Last five years:

Academic	Name of	No. of Students	No. o	sed in	Enclosure	
Year	Course/ Degree	appeared in the final year exam	≥ 75%	≥ 65% < 75%	< 65%	number

9. Record of Court Cases filed/admitted against the Institution during Last five years:

S.No.	Subject of court case with Nos.	filed/admitted	Year	Present status	Enclosure number

10. Record of complaints against the Institution during Last five years :

S.No.	Subject of complaint	Name of Judiciary body to which complaint has been lodged	Year	Present status	Enclosure number

11. Faculty Position of the Institution:

S.	Name of	Designation	Qualification	Discipline	Date of	Total	No. o	f Publicat	ion
No.	Faculty				joining the Institution	Experience	International Journal	National Journal	Conference / Seminar

12.	Details	of	International/	National	Conferences/	Seminars/Work	Shops	organized
	during la	st f	ive years :					

S.No.	Theme/Topic	International/ National Conferences/ Seminars/Work Shop	Year	Duration	No of Participants	Enclosure number

13. Details of Awards received by the Institute/ Individual:

S.No.	Name of Award	In case of Individual Name of Faculty concerned	Year	Enclosure number

14. Details of quality certifications:

S.No.	Name of quality certifications	Name of issuing body	Year	Validity	Enclosure number

15. Details of International collaboration/Tie-ups with foreign universities :

S.No.	Name of collaborating International university	Purpose of collaboration	Year of MOU	Validity/ Period	Enclosure number	

16. Details of Publications of text books by faculties during working in the Institution:

S.No.	Name of author / faculty	Name of co- author if any	Title of the book	Publisher	No of Editions	Enclosure number

17. Details of the procedure laid downs for student's feedback : (Enclose the copy of the feedback proforma)

18. Placement record of last five years:

S.	Name of Company visited the	No of Students Placed in the					
No.	Institute	year	year	year	year	year	
	Total:						

Signature of Competent Authority with Seal