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| PROFORMA- II |

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| Report of the Local Inquiry Committee on the grant of Renewal of Affiliation to ………………..………………………………………………………… for the year…………………….  |

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| Ref: University Notification No. Dated:  |
| Date of Inspection: |

I. **THE COMMITTEE**

|  |  |  |
| --- | --- | --- |
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II. **THE COLLEGE**

|  |  |  |
| --- | --- | --- |
| a. | Name and address of the College |  |
| b. | Name of the Management  |  |
| c. | Whether it is run by SC/ST/ Minority |  |
| d. | No. of Governing Council meetings held during the year  |  |
| e. | Name of the Principal with qualification and Phone number  |  |

III. **COURSE PARTICULARS**

|  |  |
| --- | --- |
| Existing | Sought |
|  |  |
|  |  |

IV. **ADEQUACY OF EXISTING FACILITIES**

|  |  |
| --- | --- |
| Building |  |
| Floor area |  |
| No. of Class rooms |  |
| Laboratory |  |
| Library |  |
| Principal room |  |
| Office room |  |
| Staff room |  |
| Staff quarters |  |
| Ladies room |  |
| Toilets |  |
| Water & Power supply |  |
| Sports facilities |  |
| Hostel |  |
| Other facilities |  |

V. **STAFF PARTICULARS**

|  |  |
| --- | --- |
| State the adequacy & qualification |  |
| Fulfillment of Reservation & Roster |  |
| Fulfillment of Recruitment norms |  |
| Whether full-time Librarian is appointed |  |
| Whether full-time Physical Director is appointed  |  |

|  |  |
| --- | --- |
| Whether the fees collected at the rates prescribed by the University? |  |

VI. **MAINTENANCE OF REGISTERS**

|  |  |
| --- | --- |
| Service Register |  |
| Acquaintance Register |  |
| Attendance Register |  |
| Scholarship disbursement Register |  |

VII. **Fulfillment of the conditions imposed by the previous LIC**

|  |  |
| --- | --- |
| Specify the conditions imposed by the previous LIC |  |
| Action taken by the college |  |

VIII. **ACHIEVEMENTS OF THE COLLEGE**

|  |  |
| --- | --- |
| Results |  |
| Sports |  |
| Achievement of the staff |  |

|  |  |  |
| --- | --- | --- |
| IX. | Whether DCF-2 forms on AISHE [All India Survey on Higher Education] portal have been uploaded during the year: 2010-11 to 2015-16. If so furnish copy of the latest certificate.  | Reference No. ....... |

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| --- | --- |
| X. | **WHETHER THE COLLEGE IS ACCREDITED BY nAAC? IF YES, PROVIDE tHE fOLLOWING INFORMATION.** |

|  |  |
| --- | --- |
| i) | Date of accreditation : |
| ii) | Grade :  |

|  |  |
| --- | --- |
| XI. | **WHETHER the internal quality assurance cell is constituted in the college / institutiion?** |
| If yes, give the list of members.  |

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| XII. | Whether qualified teachers paid reasonable salary and others paid state scale including non-teaching staff.  |  |

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| XIII. | Whether roster system is strictly followed while appointing teaching and non-teaching staff and also in admission of students. |  |

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| XIV. | Whether B.O.A. and anti-women harassment cell are constituted. |  |

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| XV. | Whether ramp facility is provided to the physically disabled students and staffs. |  |

**RECOMMENDATIONS**