

PROFORMA-1

**PROPOSAL SENT BY THE PRINCIPAL OF THE COLLEGE FOR THE
NOMINATION TO THE ACADEMIC COUNCIL**

(One N.C.C Cadet)

1.	Name of the Cadet		
2.	Registration Number		
3.	Rank		
4.	Name of the N.C.C.Unit	Name:	
		No:	
5.	Achievement of the Cadet in N.C.C.during the previous years		
	a) At National Level		
	b) At State Level		
6.	Particulars of passing 'B' and 'C' examinations		
7.	Particulars of Camps attended		
	Date	Place	Activities in the Camp
8.	The Course and year in which the student/cadet is studying on the date of sending this proposal		
9.	Name of the College and Mailing address		
10.	Residential Address of the Student/Cadet		
	a) Permanent Address	Address:	
		Phone:	
	b) Temporary Address	Address	
		Phone:	

Note: Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

CONSENT LETTER

In case the University nominates me to the Academic Council for the
Year(s)..... I accept to serve as the Member of the same.

Signature of the Student/Cadet

.....

The above facts are correct.

Signature of the N.C.C. Officer of the Unit

.....

Recommendation of the Principal

I recommend the above Student / Cadet for the nomination to the Academic Council of
the University.

Signature of the Principal
(Seal)

PROFORMA-2

**PROPOSAL SENT BY THE PRINCIPAL OF THE COLLEGE FOR THE
NOMINATION TO THE ACADEMIC COUNCIL**

(One N.S.S Volunteer Studying in Degree Course)

1.	Name of the N.S.S Volunteer					
2.	Registration Number					
3.	Rank					
4.	Name of the N.S.S. Unit and Number	Name: No:				
5.	Achievement of the Cadet Volunteer in N.S.S. during the previous years					
	c) At National Level					
	d) At State Level					
6.	Particulars of Camps attended					
	Date	Place	Activities in the Camp(s) (Both Annual and Special Camps)			
7.	The Course and year in which the student/volunteer is studying on the date of sending this proposal					
8.	Percentage of Marks scored in the Previous examinations	S.S.L.C	P.U.C.	Degree		
				I Year	II Year	III Year
9.	Name of the College and Mailing address					
10.	Residential Address of the Student/Volunteer					
	c) Permanent Address	Address: Phone:				
	d) Temporary Address	Address Phone:				

Note: Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

CONSENT LETTER

In case the University nominates me to the Academic Council for the Year(s)..... I accept to serve as the Member of the same.

Signature of the Student/ Volunteer

.....

The above facts are correct.

Signature of the Programme Officer

Unit Number:.....

.....

Recommendation of the Principal

I recommend the above Student / Volunteer for the nomination to the Academic Council of the University.

Signature of the Principal
(Seal)

PROFORMA-4

**PROPOSAL SENT BY THE CHAIRPERSON OF THE DEPARTMENT OF STUDIES /
PRINCIPAL OF THE COLLEGE FOR THE NOMINATION TO THE ACADEMIC
COUNCIL**

(One Outstanding Post-Graduate Student)

1	Name of the Student and Registration Number								
2.	The Course and year in which the student is studying on the date of sending this proposal								
3.	Percentage of Marks scored in the Previous examinations	S.S.L.C	P.U.C.	Degree				First year of the P.G. course	
				I Year		II Year		III Year	
		I Sem	II Sem	III Sem	IV Sem	V Sem	VI Sem		
4.	Name of the Department of Studies/College and Mailing address								
5.	Residential Address of the Student								
	e) Permanent Address	Address:							
		Phone:							
	f) Temporary Address	Address							
		Phone:							

Note: Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

CONSENT LETTER

In case the University nominates me to the Academic Council for the Year(s)..... I accept to serve as the Member of the same.

Signature of the Student

Recommendation of the Chairperson/Principal

I recommend the above Student for the nomination to the Academic Council of the University.

Signature of the Chairperson/Principal
(Seal)

PROFORMA-5

**PROPOSAL SENT BY THE CHAIRPERSON OF THE DEPARTMENT OF STUDIES /
PRINCIPAL OF THE COLLEGE FOR THE NOMINATION TO THE ACADEMIC
COUNCIL**

(One Outstanding Student of Professional Course)

1	Name of the Student and Registration Number										
2.	The Course and year in which the student is studying on the date of sending this proposal										
3.	Percentage of Marks scored in the Previous examinations	S.S.L.C	P.U.C	Degree						First year of the P.G. course I Sem& II Sem	
				I Year		II Year		III Year			
				I Sem	II Sem	III Sem	IV Sem	V Sem	VI Sem		
4.	Name of the Department of Studies/College and Mailing address										
5.	Residential Address of the Student										
	a) Permanent Address	Address:									
		Phone:									
	b) Temporary Address	Address									
		Phone:									

Note: 1. Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

2. M.B.A., M.C.A., B.H.M., B.Ed., M.Ed., B.P.Ed., M.P.Ed., BASLP, MASLP, MSc. (Medical Physics) and such other courses leading to a particular profession shall considered as professional courses.

CONSENT LETTER

In case the University nominates me to the Academic Council for the Year(s)..... I accept to serve as the Member of the same.

Signature of the Student

Recommendation of the Chairperson/Principal

I recommend the above Student for the nomination to the Academic Council of the University.

Signature of the Chairperson/Principal
(Seal)

PROFORMA-6

**PROPOSAL SENT BY THE CHAIRPERSON OF THE DEPARTMENT OF STUDIES /
PRINCIPAL OF THE COLLEGE FOR THE NOMINATION TO THE ACADEMIC
COUNCIL**

(One Research Student / Scholar)

1.	Name of the Research Student / Scholar										
2.	Topic of Research										
3.	The Date of Registration in the University										
4.	Percentage of Marks scored in the Previous examination	S.S.L.C	P.U.C	PG Degree		Research Publications					
				Course	%						
5.	Name of the Guide and address										
6.	Name of the Department of Studies / College and Mailing address										
7.	Is the Research Centre attached to the College recognised by the University if so, give details										
8.	Residential Address of the Research Student / Scholar										
	a) Permanent Address	Address:									
		Phone:									
	b) Temporary Address	Address:									
		Phone:									

Note: Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

CONSENT LETTER

In case the University nominates me to the Academic Council for the Year(s)..... I accept to serve as the Member of the same.

Signature of the Student

.....

The above facts are correct

Signature of Guide.

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Recommendation of the Chairperson/Principal

I recommend the above Research Student/Scholar for the nomination to the Academic Council of the University.

Signature of the Chairperson.
(Seal)

PROFORMA-7

**PROPOSAL SENT BY THE CHAIRPERSON OF THE DEPARTMENT OF STUDIES /
PRINCIPAL OF THE COLLEGE FOR THE NOMINATION TO THE ACADEMIC
COUNCIL**

(One Degree Student)

1	Name of the Student									
2.	Registration Number									
2.	The Course and year in which the student is studying									
3.	Percentage of Marks scored in the Previous examinations	S.S.L.C	P.U.C		Degree (course)					
			Course	%age	I Year		II Year		III Year	
					I Sem	II Sem	III Sem	IV Sem	V Sem	VI Sem
4.	Name of the College and Mailing address									
5.	Residential Address of the Student									
	c) Permanent Address	Address:								
		Phone:								
	d) Temporary Address	Address								
		Phone:								

Note: Attested Copies of Certificates should be enclosed in duplicate, in support of above facts.

CONSENT LETTER

In case the University nominates me to the Academic Council for the Year(s)..... I accept to serve as the Member of the same.

Signature of the Student

Recommendation of the Chairperson/Principal

I recommend the above Student for the nomination to the Academic Council of the University.

Signature of the Principal
(Seal)