

Quick Links 1 of 1+ 

- | | | | | | |
|------------------------------------|------------------------|-----------------------|---------------------|-----------------------------------|----------------------------|
| Institute Details | Program Details | Land Details | Library Book | Financial Details | Calculate Deficiency |
| Questionnaire | Course Details | Building Details | Library Facilities | Instructional Area | Hostel Facilities |
| Contact Person/Registrar Detail | Dual/Integrated Course | Anti-Ragging | Laboratory Details | Inst Area-Comm. Fac. | Attachments (Video/Images) |
| Organization Details | Closed Courses | Faculty Details | Administrative Area | View Upload by RO | eJournal |
| Principal/Director/Vice Chancellor | Vocational Courses | Technical Staff | Amenties Area | Check TER Charges(Processing Fee) | Solar Photovoltaic Details |
| OMBUDSMAN/Grievance Details | University Name Change | Admin & Library Staff | Circulation Area | Payments | Computational Facilities |
| Other Facilities | Faculty Download | | | | |
- Reports**
- Print EOA Report 18-19
 - EOA Report User Manual

Application- Header 1 of 1+ 

-

* 'REOPEN APPLICATION' : Submitted Application can be reopened only if no payment record has been created in the 'Payments' tab.

Current Application Number *	<input type="text" value="1-3515097508"/>	Current Status:	<input type="text" value="EOA Recommended"/>
Permanent Institute Id:	<input type="text" value="1-462330021"/>	Sub Status:	<input type="text"/>
Academic Year *	<input type="text" value="2018-2019"/>	Application Opened on:	<input type="text" value="18/01/2018"/>
Chapter:	<input type="text" value="Chapter 2"/>	Application Submitted on:	<input type="text" value="29/01/2018"/>
Approval Status of Application:	<input type="text"/>	Attend Scrutiny Committee On:	<input type="text"/>
Hard Copy Of AICTE Application Submitted? :	<input checked="" type="checkbox"/>	Application Type:	<input type="text" value="Extension-Expansio"/>
Remarks, if any:	<div style="border: 1px solid #ccc; height: 50px;"></div>	Appeal Requested Date:	<input type="text"/>
		Reopened Application Date:	<input type="text"/>
		Overall Deficiency(Y/N):	<input type="text" value="Y"/>

I hereby declare that I have verified the data entered in all fields and verified the system generated deficiency report and wish to submit the same for processing for the year 2018-19
 Also, I understand that after I submit the application on Portal, my application will become un-editable:

Institute Details

Name of Institution/University/Department * DEPARTMENT OF BUSIN

Address of Institution/University/Department * DEPARTMENT OF BUSINESS

AICTE Region South-West

State/UT * Karnataka

District * DAKSHINA KANNAD

Town/City/Village * MANGALORE

Pin * 574199

Approval Year of First Course 1993

Date of the first approval by AICTE letter 11/3/1994

Bank Name SBI

Bank Account Number 10094966480

Do you Wish to change Institute Name? N

Whether your institute wish to apply for Name Change w.r.t the public notice?

Please Enter New Institute Name

Old Name of the Institute

Do you Wish to change Institute Site Address? N

Please Enter New Institute Site Address

Distance Between Old site and New site(in kms)? 0

Institute Details(Contd.)

AISHE Prefix: U

AISHE Numeric Code: 0233

AISHE Code: U-0233

National Scholarship Portal ID:

Bank IFSC Code: SBIN0008034

PAN: NOPANGIVEN

Institution/Univ/Dept Type * Government

Any Un-aided Course? N

Percentage Grant Received from Government? 100

Women's Institute N

Do you Wish to Change from Women's to Co-Ed Institute? N

Do you Wish to Change from Co-Ed to Women's Institute? N

Whether the Institute had less than 60% enrollment for the last 3 Consecutive Years?

New Name for Institute after Conversion to Co-Ed/ Women's Institute NA

Minority Institute N

Type Of Minority Institute

Name of the Minority NA

Minority Name If Linguistic

Application Approval All New Applications View | AICTE New Application

Land Phone Number:	8242287437	Land Phone Number *	2287637
Last Name:	Khan	Cell Number:	9845927457
First Name:	A M	FAX number *	2287367
Mobile Number:	9901752373	Primary Email *	deptmba@yahoo.com
Administrator Email:	amkhan@mangaloreuniv	Alternate Email:	mb_begum@yahoo.com
		Website *	www.mangaloreuniversit
		AICTE File Number *	NEW
		STD Code *	824

Questionnaire

1 (a). Number of teaching faculty approved by- University/Government?	8
1 (b). Total number of Regular/Adhoc/Contract Faculty:	7
1 (c). Total number of Adjunct Faculty/Resource Person from Industry:	1
2. Are all approved teaching faculty being paid as per VI pay commission?	Y
3. Are all the teaching faculty, as per AICTE qualification?	Y
4 (a) Do you wish to apply for Closure of Institute?:	N
4 (b). Type of Institute Closure Requested:	
5. Whether Institute is operating from Permanent Site/Temporary Site?:	Permanent!
6. Whether mandatory disclosure is uploaded in Institute's website?:	Y
7. Whether the Institute following ICAI(Institute of Chartered Accountants of India) Accounting Formats?:	N
8. Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by State Govt?:	Y
9. Fees to be charged, Reservation policy, Admission policy and Document retention policy are duly approved by Affiliating University?:	Y
10. Fees to be charged, Reservation policy, Admission policy and Document retention policy are uploaded in Institute's Website?:	Y
11. List of faculty and data uploaded on the institute web portal:	Y
12. Courses/Approved Intake displayed at the entrance of the Institute?:	Y
13. Is the Cafeteria shared among other institutes?:	N
14. Is Library and Reading Room shared among other institutes?:	N
15. Is the Computer Centre shared among other institutes?:	N