To:

The Registrar Mangalore University Mangalagangothri- 574 199.

Sir,

| I | desire | to | submit | this | application | on | behalf | of | | | | |
|-----------|-----------|--------|----------|-------|-------------|-------|----------|-------|-------------|--------|-----------|------|
| | | | | (| Name of the | e Tru | st / Soc | ciety | / Govt.) fo | or sta | arting a | new |
| college, | viz | | | | | (Nan | ne of t | he | College) to | be | affiliate | d to |
| Mangalo | re Univer | sity f | or | | | | (Name | of tl | ne degrees | / dipl | omas). | The |
| college i | s propos | ed to | be start | ed at | | | | | (mention t | he lo | cation) | from |
| the acac | emic yea | r | | | | | | | | | | |
| | | | | | | | | | | | | |

In support of this application I am enclosing a copy of the resolution passed by the Society / Trust / Govt.

I am furnishing the information in the filled-in Proforma and enclosure as required under section 59(3) of the Karnataka State Universities Act 2000 and its relevant statutes. I will supply additional information if called for by the University or any of its committees appointed to inquire into our proposal.

I give an assurance on behalf of the Society / Trust / Govt. that all the conditions imposed or proposed to be imposed by Mangalore University, for the maintenance of efficiency, academic standard and discipline in the college and that all the directions given by the University from time to time will be strictly complied. I also give an assurance on behalf of the Society/ Trust/ Govt. that the college will fully co-operate with the University by extending its infrastructure facility for the purpose of holding University examination valuation and other academic and extra curricular activities.

The affiliation fee of Rs. paid vide Challan / D.D./ Receipt No. dated drawn in favour of the Registrar, Mangalore University is enclosed herewith. (Cheques will not be accepted).

Yours faithfully,

Signature of the President or Secretary of the Trust/Society/ Govt. authority with seal

Place: Date:

Full Communication Address with Telephone No:, Fax No. & E-mail No:

APPLICATION FORM FOR FRESH AFFILIATION TO A NEW COLLEGE

:

:

1. PARTICULARS OF THE PROPOSED COLLEGE:

- 1.1 Name and Postal address of the college
- 1.2 Name of the Management/Society/Trust
 - a) Whether it is run by SC / ST, Minority? :
 - b) List of Trust / Governing Council members : (List to be enclosed)
 - c) List of Institutions run by Management : (List to be enclosed)
- 1.3 Name of the designated authority and address : with Telephone No:, Fax, E-mail etc.

2. PARTICULARS OF COURSE/S PROPOSED:

| Course | Languages | Optionals | Intake |
|--------|-----------|-----------|--------|
| | | | |
| | | | |

3. NEED AND FEASIBILITY FOR STARTING THE COLLEGE:

| 3.1 Proposed Area of the College | : | Rural / Urban |
|---|---|---------------|
| 3.2 The No. of Institutions / Colleges offering similar courses in the vicinity (List to be enclosed) | : | |
| 3.3 The No. of feeder Institution in the vicinity (List to be enclosed) | : | |
| 3.4 Availability of transport and communication facilities in the locality | : | |
| 3.5 Any other relevant facilities available | : | |

4. INFRASTRUCTURAL FACILITIES:

- 4.1 Extent of land available for the proposed college (in hectares)
 - a) Extent of land in possession:
 - b) Extent of land earmarked for the college: (Relevant documents including plan of the building to be enclosed)

- 4.2 Details of existing buildings:
 - a) Building

Own / Leased

b) Floor area (in sq. feet)

c) Details of the following infrastructural facilities:

| | No. | Dimensions (in sq. ft.) |
|---------------------|-----|----------------------------|
| a) Class rooms | | |
| b) Laboratory | | |
| c) Library room | | |
| d) Principal's room | | |
| e) Office room | | |
| f) Staff room | | |
| g) Ladies room | | |

:

:

d) Availability of other facilities:

| a) Toilets | : |
|---|---|
| b) Water & Power Supply | : |
| c) Sports | : |
| d) Any other relevant facilities (specify) | : |

4.3 Whether any other courses are offered in the same building? Yes/ No. If yes, particulars of the course, area used etc. should be furnished below.

| Course | No. of rooms | Area (in sq. ft) |
|--------|--------------|------------------|
| | | |

5. ADDITIONAL INFORMATION IN RESPECT OF PROFESSIONAL COLLEGES:

- 5.1 Whether approval of concerned professional statutory body/ apex body is sought? Yes/ No. If yes, Order No...... dated (Enclose the copy)
- 5.2 Availability of the following facilities:
 - a) Hospital :
 - b) Court :
 - c) School :
 - d) Hotel :

6. ASSETS OF THE TRUST / SOCIETY / COLLEGE:

- a) Immovable (extent of land in value) :
- b) Movable
- c) Deposits and Security (enclose the copies of relevant documents) :

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7. REQUIREMENTS TO BE FULFILLED:

Recruitment of Teaching Staff/ Non-teaching/ Technical/ Library/ Physical Director etc.,

8. ANY OTHER INFORMATION:

DECLARATION

I, on behalf of the Institution hereby give an assurance that after the college is affiliated, any transference of the management, changes in the teaching staff and other alterations which result in any of the aforesaid requirement not being fulfilled or continue to be fulfilled, shall be forthwith reported to the University and to the State Government or such Authority as the Government / University.

I also undertake to assure that we will make admission to the course only after the grant of affiliation is communicated by the University.

Further, I do declare that the informations furnished in the application are true.

Signature of the President / Secretary of the Trust / Govt. Authority with Seal

Note:

- 1) Applications are liable to be rejected if the information furnished under various columns of the Proforma is found inadequate.
- 2) In the case of professional colleges approval of the statutory bodies like NCTE / AICTE / Rehabilitation Council of India / Bar Council of India etc. shall have to be obtained before admitting students for the course.
- 3) If any false or incorrect information is given in the application, it may lead to rejection.

MANGALORE UNIVERSITY

STATEMENT SHOWING THE AMOUNT OF AFFILIATION FEES PAID TO MANGALORE UNIVERSITY FUND FOR THE YEAR

| Binner Cal | | Temporary Aff | iliation | Permanent Affiliation | | | |
|--------------------------------------|---------------|-----------------|-------------------------------|-----------------------|--------------------|------------------------------------|--|
| Name of the Institution / College | Courses inclu | ding Speciality | Extension additional subjects | Courses | Amount remitted | Bank Challan No. / | |
| | Fresh | Renewal | Fresh | | | D.D. No. / Receipt No. and date | |
| | 1 | | | | | | |
| | | | | | | | |
| | | | | | | | |

Signature of the Principal with Seal