Letter of Intent (LOI) for Colleges

Date of submission: ……………………………..…. (DD/MM/YYYY)

Institution Email ID: ……………………….…………

1	Letter of Intent	☐ Accreditation ☐ Re-Assessment
	Cycle of Accreditation (When an institution undergoes the accreditation process for the first time it is referred to as Cycle 1 and the consecutive five year periods as Cycles 2, 3, etc.)	☐ Cycle 1 ☐ Cycle 2 ☐ Cycle 3
	Date of previous accreditation by NAAC (applicable for Cycle 2, Cycle 3, Cycle 4 and Re-Assessment only)	Cycle 1: ……………… (DD/MM/YYYY) Cycle 2: ……………… (DD/MM/YYYY) Cycle 3: ……………… (DD/MM/YYYY) Cycle 4: ……………… (DD/MM/YYYY)
2	Name of the College	
3	Name of the Head of the Institution	
3.a	Designation	
4	Address	
	State/UT	
	City	
	Pin	
	Phone No.	
	Alternate Phone No	
	Mobile No	
	Alternate Mobile No.	
	Fax	
	Email	
	Alternate Email	
	Website [e.g.:www.abc.com] *(Websites with special characters are not accepted due to security reasons.)	

5	Date of establishment	……………………………(DD/MM/YYYY)
5.a	Have two batches of students graduated from the college?	☐ Yes ☐ No
6.a.	Is the College recognized under section 2(f) of the UGC Act?	☐ Yes ☐ No
	If yes, date of recognition by UGC under section 2(f)	……………………………(DD/MM/YYYY)
	Attach 2(f) certificate	
6.b.	Is the College recognized under section 12B of the UGC Act?	☐ Yes ☐ No
	If yes, date of recognition by UGC under section 12B	………………………………(DD/MM/YYYY)
	Attach UGC 12B certificate	
	Attach latest Grant Certificate	
7.a.	Name of the university to which the college is affiliated, or of which the college is a constituent **Provide details:**	
	State in which the affiliating university is located	
	Name of the university	
	Attach affiliated/constituent recognition certificate	
	Type of affiliation	☐ Temporary ☐ Permanent
7.b.	If the institution is not affiliated to a university, does it offer any programmes recognized by any Statutory Professional Regulatory (SPR) Council (which is equivalent to a post graduate programme of a university) (e.g.: AICTE, MCI, DCI, NCI etc...)?	☐ Yes ☐ No
	If yes, provide details:	
	Name of the programmes	
	Name of SPR Council recognizing it	
	Equivalent university degree	
8.a	Is the institution recognised as an Autonomous College by the UGC?	☐ Yes ☐ No
	If yes, provide details:	
	Date of conferment of the status:	……………………………(DD/MM/YYYY)
	Attach Autonomous status certificate	
8.b.	Is the institution recognised as a 'College with Potential for Excellence (CPE)' by the UGC?	☐ Yes ☐ No
	If yes, provide details:	
	Date of conferment of the status:	……………………………(DD/MM/YYYY)
	Attach CPE status certificate	

8.c	Is the College offering any programmes recognised by any Statutory Regulatory Authority (SRA)	☐ Yes ☐ No
	If yes, provide details:	
	Statutory Regulatory Bodies	☐ AICTE ☐ DCI ☐ NCTE ☐ MCI ☐ PCI ☐ Other
	Attach SRA status certificate	
9.a	Nature of the college	☐ Government ☐ Private
	If private	☐ Grant-in-aid ☐ Self financing
9.b	Number of Degrees offered	
	Certificate	
	Diploma	
	UG	
	PG	
	PG Diploma recognised by statutory authority	
	Research	
	Others	
9.c	Details of Degrees offered (e.g.: B.A, B.Com, M.Sc etc...)	
	Arts	
	Commerce	
	Science	
	Education	
	Health Sciences	
	Engineering and Technology	
	Management	
	Others	
10	Whether Teacher Education / Physical Education Department is opting for assessment and accreditation separately?	☐ Yes ☐ No
11	Total Number of	
	Teaching Staff	
	Non-Teaching Staff	
	Students	
12	Date of establishment of IQAC (Optional for Cycle 1)	…………………………(DD/MM/YYYY)