

Self-Study for Autonomous Colleges

B. Profile of the Autonomous College

1. Name and address of the College:

| | |
|----------|--------|
| Name: | |
| Address: | |
| City: | State: |
| Website: | |

2. For communication:

| Designation | Name | Telephone with STD code | Mobile | Fax | Email |
|---------------------------------|------|-------------------------|--------|-----|-------|
| Principal | | O: R: | | | |
| Vice Principal | | O: R: | | | |
| Steering Committee Co-ordinator | | O: R: | | | |

3. Status of the Autonomous College by management.

- i. Government
- ii. Private
- iii. Constituent College of the University

4. Name of University to which the College is Affiliated

5. a. Date of establishment, prior to the grant of 'Autonomy' (dd/mm/yyyy)

b. Date of grant of 'Autonomy' to the College by UGC: (dd/mm/yyyy)

6. Type of institution:

a. By Gender

i. For Men

ii. For Women

iii. Co-education

b. By shift

i. Regular

- ii. Day
- iii. Evening

c. Source of funding

- i. Government
- i. Grant-in-aid
- ii. Self-financing
- iii. Any other (Please specify)

7. Is it a recognized minority institution?

- Yes
- No

If yes specify the minority status (Religious/linguistic/ any other) and provide documentary evidence.

8. a. Details of UGC recognition:

| Under Section | Date, Month & Year (dd-mm-yyyy) | Remarks (If any) |
|---------------|------------------------------------|---------------------|
| i. 2 (f) | | |
| ii. 12 (B) | | |

(Enclose the Certificate of recognition u/s 2 (f) and 12 (B) of the UGC Act)

b. Details of recognition/approval by statutory/regulatory bodies other than UGC (AICTE, NCTE, MCI, DCI, PCI, RCI etc.)

| Under Section/clause | Day, Month and Year (dd-mm-yyyy) | Validity | Programme/ institution | Remarks |
|----------------------|-------------------------------------|----------|---------------------------|---------|
| i. | | | | |
| ii. | | | | |
| iii. | | | | |
| iv. | | | | |

(Enclose the Certificate of recognition/approval)

9. Has the College been recognized

a. By UGC as a 'College with Potential for Excellence' (CPE)?

- Yes
- No

If yes, date of recognition : (dd/mm/yyyy)

b. For its contributions/performance by any other governmental agency?

- Yes
- No

If yes, Name of the agency and
 Date of recognition: (dd/mm/yyyy)

10. Location of the campus and area:

| | |
|---------------------------------|--|
| Location * | |
| Campus area in sq. mts or acres | |
| Built up area in sq. mts. | |

(* Urban, Semi-urban, Rural, Tribal, Hilly Area, Any others specify)

11. Does the College have the following facilities on the campus (Tick the available facility)? In case the College has an agreement with other agencies in using such facilities provide information on the facilities covered under the agreement.

- Auditorium/seminar complex
- Sports facilities
 - * play ground
 - * swimming pool
 - * gymnasium
- Hostel
 - * Boys' hostels
 - * Girls' hostels
- Residential facilities
 - * for teaching staff
 - * for non-teaching staff
- Cafeteria
- Health centre –
 - First aid facility
 - Inpatient facility
 - Outpatient facility
 - ambulance facility
 - emergency care facility
 Health centre staff –
 - Qualified doctor Full time Part-time
 - Qualified Nurse Full time Part-time
- Other facilities
 - Bank
 - ATM
 - post office
 - book shops

- Transport facilities
 - * for students
 - * for staff
- Power house
- Waste management facility

12. Details of programmes offered by the institution: (Give data for current academic year)

| Sl. No. | Programme Level | Name of the Programme/ Course | Duration | Entry Qualification | Medium of instruction | Sanctioned/approved Student intake | No. of students admitted |
|---------|----------------------------|-------------------------------|----------|---------------------|-----------------------|------------------------------------|--------------------------|
| 1 | UG | | | | | | |
| 2 | PG | | | | | | |
| 3 | Integrated Masters | | | | | | |
| 4 | M.Phil. | | | | | | |
| 5 | Ph.D. | | | | | | |
| 6 | Integrated Ph.D. | | | | | | |
| 7 | Certificate | | | | | | |
| 8 | Diploma | | | | | | |
| 9 | PG Diploma | | | | | | |
| 10 | Any other (please Specify) | | | | | | |

13. Does the institution offer self-financed Programmes?

Yes No

If yes, how many?

14. Whether new programmes have been introduced during the last five years?

| | | | |
|-----|----------------------|----|----------------------|
| Yes | <input type="text"/> | No | <input type="text"/> |
|-----|----------------------|----|----------------------|

If yes

| | |
|--------|----------------------|
| Number | <input type="text"/> |
|--------|----------------------|

15. List the departments: (Do not list facilities like library, Physical Education as departments unless these are teaching departments and offer programmes to students)

| Particulars | Number | Number of Students |
|--|--------|--------------------|
| Science Under Graduate Post Graduate Research centre(s) | | |
| Arts Under Graduate Post Graduate Research centre(s) | | |
| Commerce | | |

| Particulars | Number | Number of Students |
|---|--------|--------------------|
| Under Graduate Post Graduate Research centre(s) | | |
| Any Other (please specify) Under Graduate Post Graduate Research centre(s) | | |

16. Are there any UG and/or PG programmes offered by the College, which are not covered under Autonomous status of UGC? Give details.

17. Number of Programmes offered under (Programme means a degree course like BA, MA, BSc, M Sc, BCom etc.)

- a. annual system
- b. semester system
- c. trimester system

18. Number of Programmes with

- a. Choice Based Credit System
- b. Inter/multidisciplinary approach
- c. Any other (specify)

19. Unit Cost of Education

(Unit cost = total annual recurring expenditure (actual) divided by total number of students enrolled)

- (a) including the salary component
- (b) excluding the salary component

20. Does the College have a department of Teacher Education offering NCTE recognized degree programmes in Education?

Yes No

If yes,

- a. How many years of standing does the department have?
..... years
- b. NCTE recognition details (if applicable)
Notification No.:
Date: (dd/mm/yyyy)
- c. Is the department opting for assessment and accreditation separately?
Yes No

21. Does the College have a teaching department of Physical Education offering NCTE recognized degree programmes in Physical Education?

Yes No

If yes,

a. How many years of standing does the department have?
 years

b. NCTE recognition details (if applicable)
 Notification No.:
 Date: (dd/mm/yyyy)

c. Is the department opting for assessment and accreditation separately?
 Yes No

22. Whether the College is offering professional programme?

Yes No

If yes, please enclose approval / recognition details issued by the statutory body governing the programme.

23. Has the College been reviewed by any regulatory authority? If so, furnish a copy of the report and action taken there upon.

24. Number of teaching and non-teaching positions in the College

| Positions | Teaching faculty | | | | | | Non- teaching staff | | Technical staff | |
|--|------------------|----|---------------------|----|---------------------|----|---------------------|----|-----------------|----|
| | Professor | | Associate Professor | | Assistant Professor | | | | | |
| | *M | *F | *M | *F | *M | *F | *M | *F | *M | *F |
| Sanctioned by the UGC / University / State Government <i>Recruited</i> <i>Yet to recruit</i> | | | | | | | | | | |
| Sanctioned by the Management/Society or other authorized bodies <i>Recruited</i> <i>Yet to recruit</i> | | | | | | | | | | |

*M-Male *F-Female

25. Qualifications of the teaching staff

| Highest qualification | Professor | | Associate Professor | | Assistant Professor | | Total |
|-----------------------|-----------|--------|---------------------|--------|---------------------|--------|-------|
| | Male | Female | Male | Female | Male | Female | |
| Permanent teachers | | | | | | | |
| D.Sc./D.Litt. | | | | | | | |
| Ph.D. | | | | | | | |
| M.Phil. | | | | | | | |
| PG | | | | | | | |
| Temporary teachers | | | | | | | |

| | | | | | | | |
|--------------------|--|--|--|--|--|--|--|
| Ph.D. | | | | | | | |
| M.Phil. | | | | | | | |
| PG | | | | | | | |
| Part-time teachers | | | | | | | |
| Ph.D. | | | | | | | |
| M.Phil. | | | | | | | |
| PG | | | | | | | |

26. Number of Visiting Faculty/ Guest Faculty engaged by the College.

27. Students enrolled in the College during the current academic year, with the following details:

| Students | UG | | PG | | Integrated Masters | | M.Phil. | | Ph.D. | | Integrated Ph.D. | | D.Litt. / D.Sc. | | Certificate | | Diploma | | PG Diploma | |
|---|----|---|----|---|--------------------|---|---------|---|-------|---|------------------|---|-----------------|---|-------------|---|---------|---|------------|---|
| | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F | M | F |
| From the state where the College is located | | | | | | | | | | | | | | | | | | | | |
| From other states of India | | | | | | | | | | | | | | | | | | | | |
| NRI students | | | | | | | | | | | | | | | | | | | | |
| Foreign students | | | | | | | | | | | | | | | | | | | | |
| Total | | | | | | | | | | | | | | | | | | | | |

*M-Male F-Female

28. Dropout rate in UG and PG (average for the last two batches)

UG PG

29. Number of working days during the last academic year.

30. Number of teaching days during the last academic year

31. Is the College registered as a study centre for offering distance education programmes for any University? Yes No

If yes, provide the

a. Name of the University

b. Is it recognized by the Distance Education Council?
Yes No

c. Indicate the number of programmes offered.

32. Provide Teacher-student ratio for each of the programme/course offered

33. Is the College applying for?
Accreditation : Cycle 1 Cycle 2 Cycle 3 Cycle 4
Re-Assessment:

34. Date of accreditation* (applicable for Cycle 2, Cycle 3, Cycle 4 and re-assessment only)
Cycle 1: (dd/mm/yyyy) Accreditation outcome/results
Cycle 2: (dd/mm/yyyy) Accreditation outcome/results
Cycle 3: (dd/mm/yyyy) Accreditation outcome/results
* Kindly enclose copy of accreditation certificate(s) and peer team report(s)

Cycle 1 refers to first accreditation; Cycle 2 and beyond refers to reaccreditation

35. a. Date of establishment of Internal Quality Assurance Cell (IQAC)
.....(dd/mm/yyyy)
b. Dates of submission of Annual Quality Assurance Reports (AQARs).
(i) AQAR for year on(dd/mm/yyyy)
(ii) AQAR for year on (dd/mm/yyyy)
(iii) AQAR for year on (dd/mm/yyyy)
(iv) AQAR for year on..... (dd/mm/yyyy)

36. Any other relevant data, the College would like to include. (Not exceeding one page)

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