

## Institutional Information for Quality Assessment(IIQA)

AISHE ID :

1	Application For	Accreditation
	Cycle of Accreditation	Cycle1
2	Name of the College	
3	Date of establishment of the Institution	
4	Name of the Head of the Institution	
	Designation	
5	Does the college function from Own Campus	
6	Address of the College	
	State/UT	
	City	
	Pin	
	Phone No	
	Fax No	
	Mobile No	
	Registered Email	
	Alternate Email	
7	Alternate Faculty Contact Details	
	Address	
	State/UT	
	City	
	Pin	
	Phone No	
	Fax No	
	Mobile No	
	Email	
	Alternate Email	
8	Website	
9	Has the Institution completed 6 years of existence / Years of graduation of last two batches	

10	Nature of the college							
11	College Affiliation							
12	Name of the affiliating University(ies) and the state(s) in which the University(ies) is located							
	State	University Name		Documents				
13	Is the Institution recogniz	zed under section 2(f) o	of the					
14	Is the Institution recogn	izad under section 12P	of the					
14	Is the Institution recognized under section 12B of the UGC Act?							
	If yes, date of recognition	on by UGC under secti	on					
	12B along with latest Pla Grant release letter							
15	Is the institution recogni	sed as an Autonomous	3					
40	College by the UGC?			-				
16	Is the institution recognis Potential for Excellence							
17	Is the institution recognise Excellence' by the UGC'							
18	Is the College offering as by any Statutory Regula		ised					
	Statutory Regulatory Authorities		CDA			Desument		
				SKA	program		Document	
19	If the institution is not af			_				1-1-
	offering programmes recognized by any Statutory Regulatory Authorities (SRA), are the programmes							
	recognized by Association other appropriate Government							
	equivalent to UG / PG P	rogrammes of a Univer						
20	Number of programmes	offered						
	Programmes Number							
21	Programme Details							
21					T		T	
	Program	Department	Universi	ty Affiliation	SRA Recog	nition	Affiliation Status	
22	Number of Teaching Sta	ff by employment statu	ıs (perm	anent / temp	oorary) and by	gender		
	Male Female T			Transgender Total				
		1						

23	Number of Non-Teaching Staff by employment status (permanent / temporary) and by gender								
	Male	Female	Transgender	Total					
				-					
24	Number of Students on roll by gender								
27	Number of Students of foil by gender								
	Male	Female	Transgender	Total	m. = 3-3-1				
25	Does the institution	n have statutory cells / committees							
26	Date of establishm	ent of IQAC		7					
		AC meeting and Action Taken							
	Report should be uploaded on the institutional website.		Date	View Document					
	website.								
27		made statutory declaration on the							
		under Section 4 (1) (b) of the RTI d and amended from time to time.							
28		nave an academic MoU with any							
20	foreign institution	ave an adddenie wee with any							
29	Date of uploading	data on MHRD website for All India							
	Survey on Higher I	Education (AISHE).							
30		by the Head of the Institution for							
		rith Rules & Regulations of Central C and other Statutory Bodies, State							
		Affiliating University in the							
		enclosed herewith.							
31	Registration Fee p	aid details.							