



## Letter of Intent (LOI) for Physical Education (PE) / Teacher Education (TE) Universities

**Please select any one of the following**

- University of Physical Education
- University of Teacher Education

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

Institution Email ID: .....

|     |   |  |
|-----|---|--|
| 1   | Letter of Intent  | <input type="checkbox"/> Accreditation <input type="checkbox"/> Re-Assessment  |
|     | Cycle of Accreditation<br>(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.) | <input type="checkbox"/> Cycle 1<br><input type="checkbox"/> Cycle 2<br><input type="checkbox"/> Cycle 3                 |
|     | Date of previous accreditation by NAAC<br>(applicable for Cycle 2, Cycle 3, Cycle 4 and Re-Assessment only)   | Cycle 1: ..... (DD/MM/YYYY)<br>Cycle 2: ..... (DD/MM/YYYY)<br>Cycle 3: ..... (DD/MM/YYYY)<br>Cycle 4: ..... (DD/MM/YYYY) |
| 2   | Name of the University  |  |
| 3   | Name of the Head of the University  |  |
| 3.a | Designation   |  |
| 4   | Contact Details   |  |
|     | 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 of the University<br><b>Attach NCTE recognition certificate</b>   | .....(DD/MM/YYYY)   |
| 5.a  | Have two batches of students graduated from the University?   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| 6.a. | Is the University recognized under section 2(f) of the UGC Act?   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|      | If yes, date of recognition by UGC under section 2(f)   | .....(DD/MM/YYYY)   |
|      | <b>Attach UGC 2(f) certificate</b>  |   |
| 6.b. | Is the University recognized under section 12B of the UGC Act?  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|      | If yes, date of recognition by UGC under section 12B  | .....(DD/MM/YYYY)   |
|      | <b>Attach UGC 12B certificate</b>   |   |
|      | <b>Attach latest Grant Certificate</b>  |   |
| 7.   | Nature of the University / Institution  | <input type="checkbox"/> Central University<br><input type="checkbox"/> Institution of National Importance<br><input type="checkbox"/> State University<br><input type="checkbox"/> Private University (State)<br><input type="checkbox"/> Deemed to be University established under section 3 of the UGC Act<br><input type="checkbox"/> Any other |
|      | If Private or Deemed to be University , attach relevant recognition certificate from UGC  |   |
| 8.   | Status of the University  | <input type="checkbox"/> Affiliating <input type="checkbox"/> Unitary   |
| 9.   | If the University / Institution is not within the purview of UGC indicate the Ministry / Authority through which it was established |   |
| 10.  | Is the institution recognized as a 'University with Potential Excellence (UPE)' by the UGC?   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|      | If yes, date of recognition   | .....(DD/MM/YYYY)   |
|      | <b>Attach UPE status certificate</b>  |   |
| 11.  | Does the institution have duly recognized off-campus (es)?  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|      | If yes, give details of location(s)   |   |
| 12.  | Nature of funding   | <input type="checkbox"/> Central <input type="checkbox"/> State <input type="checkbox"/> Self Financing<br><input type="checkbox"/> Others .....  |
| 13.  | Faculties / Schools   | <input type="checkbox"/> Education<br><input type="checkbox"/> Any other: .....   |

|     |   |   |
|-----|---|---|
| 14. | Number of degrees offered   |   |
|     | UG  |   |
|     | PG  |   |
|     | PG Diploma recognized by statutory authority  |   |
|     | Research  |   |
|     | Others  |   |
| 15. | Is the University offering programmes recognised by other Statutory Regulatory Authorities (SRA)? | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
|     | <b>If yes, provide details:</b>   |   |
|     | Statutory Regulatory Bodies   | <input type="checkbox"/> AICTE <input type="checkbox"/> DCI <input type="checkbox"/> NCTE<br><input type="checkbox"/> MCI <input type="checkbox"/> PCI <input type="checkbox"/> Other |
|     | <b>Attach SRA status Certificate</b>  |   |
| 16. | Total number of   |   |
|     | Teaching Staff:   |   |
|     | Students :  |   |
|     | Non-Teaching Staff:   |   |
| 17. | Date of establishment of IQAC<br>(Optional for Cycle 1)   | .....(DD/MM/YYYY)   |