**TUMKUR UNIVERSITY**

**CHECK LIST TO BE SUBMITTED BY THE COLLEGE TO THE**

**LOCAL INQUIRY COMMITTEE**

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| DATE OF VISIT | **:** |  |
| Name and Address of the college in full | **:** |  |
| Name, Qualification, Experience and Date of Birth of the Principal | **:** |  |

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| **PART-1** | | |
| 1 | Application Number |  |
| 2 | Name of the Institution |  |
| 3 | Address of the Institution |  |
| 4 | College Code |  |

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| **I** | **DETAILS OF PARENT ORGANIZATION** |  |
| 1 | Name of the Trust/Society |  |
| 2 | Address of the Trust / Society |  |
| 3 | Village/Town/City |  |
| 4 | District |  |
| 5 | PIN |  |
| 6 | STD Code |  |
| 7 | Land Line Number |  |
| 8 | Fax |  |
| 9 | E-mail Id |  |
| 10 | Web site |  |
| 11 | Name of the President/Chairman |  |
| 12 | Address of the President/Chairman |  |
| 13 | Village/Town/City |  |
| 14 | District |  |
| 15 | PIN |  |
| 16 | STD Code |  |
| 17 | Land Line Number |  |
| 18 | Mobile Number |  |
| 19 | E-mail Id |  |
| 20 | 2 (f) Status |  |
| 21 | 12 (B) Status |  |

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| **II** | **INSTITUTION DETAILS** | | |  |
| 1 | Name of the Institution | | |  |
| 2 | Address of the Institution | | |  |
| 3 | Village/Town/City | | |  |
| 4 | District | | |  |
| 5 | PIN | | |  |
| 6 | STD Code | | |  |
| 7 | Land Line Number 1 | | |  |
| 8 | Fax | | |  |
| 9 | E-mail Id | | |  |
| 10 | Web site | | |  |
| 11 | Year of Establishment | | |  |
| 12 | Year of first affiliation to the University | | |  |
| 13 | Type of Institution | | |  |
| 14 | Minority Institute? | | |  |
| 15 | Type of Minority | | |  |
| 16 | Name of the Minority | | |  |
| 17 | SC/ ST Institute? | | |  |
| 18 | Women Institute? | | |  |
| 19 | Any Other | | |  |
| 20 | Bank Account Number | | |  |
| 21 | Name of the Bank and Branch | | |  |
| 22 | IFSC Code | | |  |
| 23 | Address of the Bank | | |  |
| 24 | PAN Number | | |  |
| **III** | | **APPLICATION DETAILS** (Select from the below) | | |
| 1 | | Application for | 1. New College 2. Extension / Renewal of Temporary Affiliation 3. Permanent Affiliation 4.New Course 5. Increase in Intake 6. Reduction in Intake 7. Change of name of the Institute 8. Conversion of Women's Institution into Co-Ed Institution 9.Conversion of Co-Ed Institution into Women's Institution 10. Closure of Course 11. Renewal Permanent Affiliation | |

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| **IV** | **DETAILS OF GOVERNING COUNCIL** |  |
| 1 | Names of Governing Council Members (enclose list of Members) |  |
| 2 | No. of times the Governing Council meeting is convened in the last academic year |  |
| 3 | List of Other Institutions managed by the Trust/Society |  |
| 4 | Name of the Principal with qualification, phone number (Both Mobile and Landline) and e-mail id. |  |

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| **V** | **NEW COLLEGE** | |
| 1 | Justification for the establishment of the new College |  |
| 2 | Type of programme proposed to be provided |  |
| 3 | Proposal details |  |
| 4 | Details of other institutions within 10/50 kms surrounding |  |

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|  | **PART-2** |  |
| VII | LAND DETAILS (For new college also) |  |
| VIII | PROGRAMME & COURSE DETAILS |  |
| IX | BUILDING DETAILS (For new college also) |  |
| X | INSTRUCTIONAL AREA Add separately for each Course(Department) & Level wise (For new college also) |  |
| XI | ADMINISTRATIVE AREA(For new college also) |  |
| XII | AMENITIES AREA (For new college also) |  |
| XIII | CIRCULATION AREA (For new college also) |  |

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|  | **PART-3** |  |
| XIV | LABORATORY DETAILS Add separately for each Course(Department) & Level wise (For new college also) |  |
| XV | LIBRARY DETAILS (For new college also) |  |
| XVI | LIBRARY FACILITIES (For new college also) |  |
| XVII | e- JOURNALS |  |
| XVIII | COMPUTATIONAL FACILITIES (For new college also) |  |
| XVIII-A | VIDEO CONFERENCE FACILITIES |  |
| XVIII-B | SKYP USERID |  |
| XIX | HOSTEL FACILITIES (For new colleges also) |  |

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|  | **PART-4** |  |
| XX | FACULTY DETAILS |  |
|  | Department / Course |  |
|  | Faculty Student Ratio |  |
| XXI | STAFF DETAILS (For Each Staff) (Fill for each staff separately) |  |
| XXII | DETAILS OF LIBRARY STAFF, PHYSICAL EDUCATION & PLACEMENT STAFF (For Each Staff) (Fill for each staff separately) |  |
| XXIII | STUDENTS DETAILS |  |
| 1 | ADMISSION DETAILS |  |
| 2 | EXAMINATION RESULTS |  |
| 3 | PLACEMENT DETAILS (Y- Current Year) |  |

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|  | **PART-5** |  |
| XXIV | FEE STRUCTURE |  |
| XXV | FINANCIAL DETAILS FOR THE CURRENT YEAR |  |
| 1 | Income |  |
| 2 | Expenditure |  |
| 3 | Expenditure incurred in the Last 5 years towards Library, Equipment and Furniture (in Lakhs) Y- Current year |  |
| XXVI | FINANCIAL POSITION |  |
| XXVII | PREVENTION MEASURES |  |
| 1 | Anti-ragging committee |  |
| 2 | Anti-ragging squad |  |
| 3 | Anti-sexual harassment committee |  |
| 4 | Anti-sexual harassment squad |  |

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|  | **PART-6** |  |
| XXVIII | COMPLIANCE STATUS AGAINST THE OBSERVATION OF THE LIC VISITS |  |
| 1 | Observations Y-1 |  |
| 2 | Observations Y-2 |  |
| XXIX | CURRICULAR ASPECTS |  |
| 3 | Vision and Mission Statement and Institutional goals |  |
| 4 | Teaching- Learning and Evaluation |  |
| 5 | Research, Consultancy and Extension 1. Yes 2.No |  |
| 6 | Student support and progression |  |
| 7 | Governance and Leadership |  |
| 8 | Innovative and Best Practices |  |

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|  | **PART-7** |  |
| XXX | OTHER FACILITIES (Please Fill up YES/NO) |  |
| XXXI | DETAILS OF THE COURSES AFFILIATED TO OTHER UNIVERSITIES OFFERED BY THE TRUST/SOCIETY IN THE SAME CAMPUS WITHIN THE JURISDICTION OF THE UNIVERSITY |  |
| XXXII | GENERAL INFORMATION |  |
| XXXIII | DETAILS OF FEE PAID |  |
| XXXIV | ANY OTHER INFORMATION THE INSTITUTION WISHES TO FURNISH |  |
| XXXV | DECLARATION |  |

**Principal**

**(Seal and signature)**