



INSPECTION PERFORMA FOR GRANT OF AFFILIATION FOR ACADEMIC SESSION 2021-22

PART-A

1. General Information (To be filled in by the institute)

Name of the Institute													
Complete Postal Address													
Phone No.													
E-mail													
Website													
Year of Establishment													
Status of affiliation 2020-21 <i>(Approved/Conditionally approved/Partially Approved/Not approved)</i>													
Status of Society/Trust/Management <i>(Government/Autonomous/Aided/Private)</i>													
Name & Address of the Society/Trust/Management													
Name & Address of the Person to be contacted by Phone Phone No. E-mail													
Details of affiliation fee paid	Amount:..... DD/cheque No. Date:												
Land Details (Required)	Land Details (Available)												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Type of Institute</th> <th style="width: 35%;">Urban</th> <th style="width: 35%;">Rural</th> </tr> </thead> <tbody> <tr> <td>Engineering and Technology</td> <td>1.5 Acres</td> <td>4 Acres</td> </tr> </tbody> </table>	Type of Institute	Urban	Rural	Engineering and Technology	1.5 Acres	4 Acres	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">Type of Institute</th> <th style="width: 35%;">Urban</th> <th style="width: 35%;">Rural</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Type of Institute	Urban	Rural			
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Note : **To start a new program in an existing institute** ,The Land shall be the sum of the highest Land required among the Programme(s) and 50% of the Land required for each of the other Programme(s)/ Level(s) including the new Programme(s).

Signature
Convener
Member-1
Member-2



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General Insurance provided for assets against fire, burglary and other calamities			
Institution-Industry Cell			
Applied for membership of National Digital Library			
Appointment of Student Counsellor			
Occupancy & Structural Stability Certificate (As applicable)			

15. Compliance Report

Action taken on deficiencies pointed in the previous inspection reports and verification report. (*Add separate sheet for details*)

S.No.	Deficiencies/Shortcomings	Status of Compliance

16. Time Table of Previous and Current Semester

17. Any other observations/comments of the inspection committee



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PART-C

Summary and recommendation by Inspection Team:

▪ **Principal**

▪ **Faculty**

▪ **Library Staff and books, journals:**

▪ **Infrastructure:**

▪ **Laboratory**

▪ **Computer and other Facilities**

▪ **Other infrastructure and facilities**

Recommendations of the committee (Recommended/Not Recommended for Approval)
