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| **Higher Education and Research Summit 2022**  **confederation of indian universities.jpgJointly Organise by:**  IBRF LOGO PSD.tifConfederation of Indian Universities (CIU), New Delhi  &  International Benevolent Research Foundation (IBRF), Kolkata  **Phone :** 8017873737 / 7044143070  **E-mail:** [ciusummit@gmail.com](mailto:ciusummit@gmail.com), **Website : www.summit.ind.in** |

**Name of the Award Applied for:**

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# INSTITUTION DETAILS

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| **Name and Registered Address of the Institute:** |
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| **Contact No.** |  |
| **Email (1)** |  |
| **Email (2)** |  |
| **Website** |  |
| **Established year** |  |

**Status of the institution ( Tick whichever is applicable)**

* School [ ]
* General Degree College [ ] **/** Engineering College [ ] / Medical College [ ] / Management College [ ] / Law College [ ] / B.Ed College [ ] / Pharmacy College [ ] / Polytechnic College [ ] / Law College [ ] / Agriculture College [ ] / Nursing College [ ]
* Para Medical Institute [ ] / Hotel management Institute [ ] / Vocational Training Institute [ ] / ITI [ ]
* University [ ]
* Others (please specify) [ ]

**State the type of your institution ( Tick whichever is applicable)**

* Govt. Sponsored [ ] / Govt. Aided [ ]
* Autonomous (Govt.) [ ] / Non-Autonomous (Govt.) [ ]
* Autonomous [ ] / Non-Autonomous [ ]
* Managed by Trust / Society [ ]
* Others (please specify) [ ]

**Institute Affiliated by:**

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# COMMUNICATION DETAILS

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| **Principal / Director** |  |
| **Mobile** |  |
| **WhatsApp** |  |
| **Email** |  |

***If managed by Trusrt/ Society***

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| **Name and Address of the Trust/ Society** |  |
| **Website of the Trust/ Society** |  |
| **E-mail of the Trust/ Society** |  |
| **Trustee/ Secretary:** |  |
| **Mobile** |  |
| **WhatsApp** |  |
| **Email** |  |

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| **Any Other Person to communicate** |  |
| **Mobile** |  |
| **WhatsApp** |  |
| **Email** |  |

# INFRASTRUCTURE DETAILS

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| --- | --- |
| **Campus area in acres** |  |
| **Total number of classrooms** |  |
| **Number of books in library** |  |
| **Number of Faculty cabins** |  |
| **Number of laboratories** |  |
| **Number of national journal subscriptions (online + paperback version)** |  |
| **Number of International journals subscriptions (online + paperback version)** |  |
| **Are residential facilities available in the campus for students?** |  |
| **Are residential facilities available in the campus for faculty members?** |  |

**Facilities available in campus:**

|  |  |  |
| --- | --- | --- |
| **Facilities** | **YES** | **NO** |
| **Canteen** |  |  |
| **Cricket Ground** |  |  |
| **Basketball Court** |  |  |
| **Football Ground** |  |  |
| **Swimming Pool** |  |  |
| **Lawn Tennis Court** |  |  |
| **Badminton Court** |  |  |
| **Indoor games facility** |  |  |
| **Gymnasium** |  |  |
| **Students Common Room** |  |  |
| **Any other(Please specify )** |  |  |

**Please list all the Departments/ Classes in your Institute with student intake:**

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| **Department/ Class** | **Student intake** |
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| **Total Student Intake** |  |

# FACULTY & RESEARCH

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| --- | --- |
| **Total number of permanent faculty** |  |
| **Total number of Ph. Ds among permanent faculty** |  |
| **Total number of faculty with more than 10 years of teaching experience** |  |
| **Total number of Guest/ Visiting/ temporary faculty** |  |
| **Total number of Ph. Ds among Guest/ Visiting/ temporary faculty** |  |
| **Total number of Guest/ Visiting/ temporary faculty with more than 10 years of teaching experience** |  |

**Please give details of books published in the last five years which have been authored by your existing permanent faculty for every department in the following format**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of the**  **Faculty Member** | **Name of the Book** | **Name of the**  **publisher** | **Year of**  **Publication** |
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**Total number of research papers published by the existing permanent faculty in the last five years in referred journals/ boks. Please give details like name of faculty, name of journal/ books, date and paper title. (Attach as Annexure):**

**Any extraordinary characteristic of your institute you want to highlight**

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| Attach as Annexure |

**Seal of the Institution Signature with date of Principal /Director**