



SATAVAHANA UNIVERSITY KARIMNAGAR

Application for Annual Affiliation Inspection (Proforma) for the academic year 2019-20

(You are requested to examine all the details and furnish the information very scrupulously. You may note that this information shall be circulated if required by Higher Education, Govt. of Telangana or any one under RTI (Right to Information Act) - 2005)

(Use Separate Application for UG and PG Courses)

1. General Information

Name of the College (As per State Council of Higher Education Orders) with College Code	
Year of Establishment (As per State Council of Higher Education Orders)	
Address , E-Mail and Website (Mandatory) of the College (As per State Council of Higher Education Orders)	
Name of the Secretary/Correspondent	
Phone No. with STD Code and Mobile No.	
Courses offered by the College	Only UG Courses/ UG & PG Courses
Status of the College	Women's/Co-Education
Location of the College Building (as per certificate issued by MRO/Tahasildhar)	Urban/Rural/Tribal

2. Society Particulars

Name of the Sponsoring Society	
Registration No. and Year of the Registration of the Society	
Address of the Society	

3. Corpus fund Details

Installment	Amount	Period	FDR/BG No.	Date	Name of the Issuing Bank	Date of Maturity	Date of Renewal
FIRST							
SECOND							
THIRD							

Name and Signature of the Secretary/Correspondent with stamp

4. Own Land Particulars

Extent of the own land (2 acres for upto 1000 strength; 4 acres for above 1000 strength)	
Date of Registration	
Distance from the College Building	
Whether registered in the name of the Society represented by the Secretary/Member (not in any individual's name)	
Whether the representative's name is in the list of members of the Society	
Location of the Land Within Same mandal (for rural areas or within 20 km and in same District (for municipalities)	
Whether the entire land is single bit or not	
Sketch plan of the land certified by MRO/Tahasildar	Yes/No
Whether schedule of property tallied with the schedule mentioned in the Registered Sale Deed?	Yes/No

5. Building Particulars:

a) No.of Buildings (Give all particulars of the Building)

Status of the College Building	Own/Leased
OWN	LEASED
Whether registered in the name of society (Furnish the details)	Lessor's Name
	Lessee's Name
	Date of Registration
	Lease Period From: To:
Total Plinth Area of the College (As per Registered Ownership/Lease Deed documents)	
Total Carpet Area	

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b)	
Whether located in Rural/Tribal area	Yes/No
If yes, whether certificate issued by MRO/Tahasildhar of the concerned mandal is enclosed	Yes/No
Whether registered in the name of the Society represented by the Secretary/Member (not in any individual's name)	
Whether the Building Plan approved by concerned authority (Panchayat/Municipality)	Yes/No
Whether the Building Working plan attested by the Principal, Govt. Degree College	Yes/No

c)	
Total No.of buildings available in the College	
Whether all the above buildings are in the same campus	Yes/No
If Not, approximate distance between the main campus buildings and those located outside	

d)	
Whether the Campus and its surroundings provide conducive atmosphere for a college?	Yes/No

e)	
Whether the College locating near Arrack Shops or Bars, in Heavy Business Localities or Residential Flats or in any other undesirable location which is not fit for academic purposes Note: The College should not be located within 100mts from a Bar/Liquor shop	Yes/No
Photographs of the College Building(s) (Class rooms/Laboratories etc..) should be enclosed	

f)	
Whether the Degree College is within the premises of any other existing educational institution	Yes/No
If YES, furnish following particulars	
Status of the existing institution	

6. Registers

Admission	Maintained/Not Maintained properly/Not Maintained
Students Attendance	Maintained/Not Maintained properly/Not Maintained
Staff Attendance	Maintained/Not Maintained properly/Not Maintained
Salaries Acquittance	Maintained/Not Maintained properly/Not Maintained
Stock (Furniture)	Maintained/Not Maintained properly/Not Maintained
Stock (Laboratory)	Maintained/Not Maintained properly/Not Maintained

Name and Signature of the Secretary/Correspondent with stamp

7. Details of the All UG Courses/ PG Courses

S.No.	Course/Combination	Medium	Courses sanctioned year by State Council of Higher Education (Enclose the order copies)	State Council order No.	Date
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					

8. Library: Availability of Qualified Librarian: Yes/No

If Yes, Name & Qualification:

Library Accession Register : Available/Not Available

Total No.of Books ()			
Titles	Volumes	Journals	Periodicals
No.of Books Added during the year 2018-2019			
Titles	Volumes	Journals	Periodicals
Amount spent during the academic year 2018-2019:			

Name and Signature of the Secretary/Correspondent with stamp

9. Building Accommodation particulars (Use a Separate sheet, if required along with map)(for each class room and laboratory should have 600 S.Fts)

S.No.	Particulars of Accommodation (Class Room/Lab/Etc.)	Required (Carpet Area in S.Ft.)	Provided (Carpet Area in S.Ft.)	Type of Roof
1		600 sft		
2		600 sft		
3		600 sft		
4		600 sft		
5		600 sft		
6		600 sft		
7		600 sft		
8		600 sft		
9		600 sft		
10		600 sft		
11		600 sft		
12		600 sft		
13		600 sft		
14		600 sft		
15		600 sft		
16		600 sft		
17		600 sft		
18		600 sft		
19		600 sft		
20		600 sft		
21		600 sft		
22		600 sft		
23		600 sft		
24		600 sft		
25		600 sft		
26		600 sft		
27	Seminar Hall (For PG Courses)			
Total Carpet Area				

Name and Signature of the Secretary/Correspondent with stamp

10. Common facilities:

1	English Language Lab (mandatory)	600		
2	Library & Reading Room	600		
3	Principal's Room	200		
4	Staff Room	300		
5	Office Room	300		
6	Ladies Waiting Room	200		
7	Games Room	200		
8	Toilets	200		
Total Carpet Area				

Note:

Class rooms required (UG)	
Other than lab courses	3 for each section
For lab courses	2 for each section
Labs required (UG)	
1 lab for each subject in one/two combinations	

11. Details of Faculty Members

a) Name of the Principal:

Qualification:

Total Experience:

Length of Service with the present College:

Subject	Total No. of Faculty available	No. of Qualified Teachers	Whether Ratified Yes/No	Mode of Appointment	Nature of Appointment	Mode of payment of Salary
				Selection Committee/ Management	Permanent/ Temp./Part-time	Cheque/ Cash/ Bank Account

Name and Signature of the Secretary/Correspondent with stamp

b. (Use a Separate sheet, if required)

S.No.	Name of the Faculty Member along with Aadhar card number	Subject	Qualifications	Total Experience	Mode of Appointment	Photograph of the faculty
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						

12. Details of Laboratory Assistants/Lab.Attenders/Physical Directors/Ministerial Staff:
(Enclose a copy of the list with name and qualifications of the concerned staff)

No.of Lab Assistants	No.of Lab Attenders	No.of Physical Directors	Ministerial Staff		
			Administrative	Academic	Others

13. Co-ordinators particulars

Name of the Academic Co-Ordinator, Mobile Number & E-Mail ID	
Name of the Examination Co-Ordinator Mobile Number & E-Mail ID	
Name of the NSS Co-Ordinator, Mobile Number & Email-ID	
Name of the NCC I/c. Officer, Mobile Number & Email-ID	

Name and Signature of the Secretary/Correspondent with stamp

DECLARATION

On behalf of the _____(Name of the Trust/Society), I _____ Secretary / Correspondent do hereby declare that the particulars furnished above in the application for grant/extension of Temporary Affiliation to _____ (Name of the College) for the academic year 2019-2020 are correct to the best of my knowledge and belief and that I am prepared to accept any penalty or de-affiliation, if any of the particulars furnished is found to be false or misleading. I also declare that I shall abide by the conditions, rules and regulatory measures imposed by the University/TSCHE/Govt.of Telangana/UGC from time to time for granting/extending affiliation to run this college and to maintain the academic standards. I further declare that the Society/ College will respond to applications under the Right to Information Act, 2005.

Place:

Date:

Signature of the Secretary/Correspondent

Witness

Name & Address

Signature

1.

2.



SATAVAHANA UNIVERSITY
KARIMNAGAR
CHECK-LIST

S.No.	List of Enclosures	Page numbers
1	a) State Council order to start Degree College/PG courses	
	b) orders from the Government / State Council for change of college name, change of society and shifting of the college from one place to another place (if applicable)	
2	Rural/Tribal Certificate in respect of the area where the college is located, issued by the MRO/Tahasildhar	
3	Certificate of Registration of Sponsoring Society under Societies Act along with constitution and bye-laws of the Educational Society mentioning the duties of the Members of the Society and their powers	
4	Corpus fund details	
5	The Registered ownership document in respect of land possessed by the Management in the name of the Society for the proposed college	
6	Sketch plan of the land drawn by licensed surveyor and certified by the Concerned MRO/Tahasildhar	
7	Building ownership documents/lease deed documents	
8	Building Plans	
	i) The building plan along with permission letter approved by the authorities of Municipality/Corporation/Gram panchayat for construction of the building of college	
	ii) The Building plan drawn to scale by a licensed architect and certified by the principal of a nearby Government Degree College	
9	Photographs of the college building certified by the Principal nearby Government Degree College.	
10	Sanctioned orders of UG/PG Courses from the State Council from time to time	
11	Subject wise Books list (detailed)	
12	Accurate Accommodation (Class Rooms/Laboratories/Common facilities) particulars along with Building map (provide as per S.No. 9 & 10)	
13	Faculty details (Teaching / Co-Ordinators/Non-Teaching) particulars along with photographs and Aadhar card numbers	
14	Lab Equipment (Provide subject-wise detailed information)	
15	Evidence for providing of Biometric Attendance System, CC cameras and uploaded AISHE report	
16	Sanitary Certificate in respect of the college building issued by the competent authority	
17	Fire Safety Certificate /Structural soundness certificate from concerned departments	
18	Documentary evidence for parking area/play ground	

Signature of the Secretary/Correspondent along with seal