

## **NORTH-EASTERN HILL UNIVERSITY**

SHILLONG-793022.

## INSPECTION REPORT FOR PERMISSION TO START PG DEPARTMENT IN AN EXISTING COLLEGE/INSTITUTION.

[TO BE SUBMITTED BY THE INSPECTION TEAM TO DIRECTOR, COLLEGE DEVELOPMENT COUNCIL]

1.	Name and address of the College/Institution:						
	Pin: Tel: website: website:						
2.	Date and year of grant of Permanent Affiliation [please attach copy of University's notification(s)]						
3.	Year of NAAC accreditation and the grade awarded (attach copy of the award letter/certificate)						
4.							
5.	Members of the College Governing Body (attach a complete list):						
6.	(a) Name of the course/subject in which the College proposes to start the PG Department:						
	(b) Briefly state the need for starting the new PG Department:						
7.							

8.		ls about the	e UG programme	in the College in th	ne subject in v	vhich the Coll	ege proposes	to start the			
	(a) Year of starting the UG level course/subject:										
(b) Details of students for the previous years (3 years):											
		Year		ents (Pass & Hons)		Categories: SC/ST/OBC & General					
			noi or seadones (r dos el mono)								
(c) Results of the University examinations for the last three years:											
							1 _				
	Y	'ear E	Examination (Pas			o. of students		all pass			
			& Hons) course	appeared	a	passed	perc	entage			
9.	The a	icademic se	ession from whic	th the first batch	of students is	to be admit	ted for the pr	oposed PG			
	cours	e(s)/subjec	ct(s):								
10	. The n	nonth/year	from which the	irst batch of stude	nts is expecte	ed to appear fo	or the examin	ation in the			
10			ct(s) proposed:	if st bateli of stade	по в спресс	to appear it	or the examin				
	cours										
11	. Numb	oer of stude	ents to be admitte	ed to the proposed	PG Departme	ent:					
12	. State	the admiss	ion criteria for th	e proposed PG cou	ırse:						
13	. Give t	he fee stru	cture for the proj	oosed PG course:							
14	Name	es of the Pr	incinal/Director	teachers of the p	ronosed PG I	Denartment I	ihrarian Adn	ninistrative			
			-	-	-	•					
	staff with qualification(s), percentage of marks, experience(s), dates of joining, whether regular/part										
	time employees:										
	Sl.	Name	Designation	Qualification(s)	% of	Date of	Experience	Regular/			
	No.				marks	joining		Part time			
	l	1	i	İ	1	1	1	1			

			d PG course. Also indicate additions											
• •	roposed:													
(b) Attach a list of laboratory equipments and specification of laboratory space (if proposed Department involves laboratory course):														
										5	-			
										16. Details of fixed deposi	Details of fixed deposits in favour of the College:			
(a copy of the bank cer														
Name and Address	of the Bank	Account No.	Amount											
The Convener of the Inspection Team should obtain and enclose a certificate from the sponsoring authority that all the information provided by them about the proposed PG Department/Course are correct.														
Recommendations of t	he Inspection Te	eam (please be specific)												
Signatures of the mem	bers of the Inspe	ction Team.												