

NATIONAL BOARD OF ACCREDITATION

Pro-forma for Pre-Qualifiers

*(Extension of Duration of Accreditation from 5 years to 6 years and for full accreditation for 6 years)
[Applicable to – UG Pharmacy]*

PARTA- Profile of the Institute

A1. Name of the College:-

Year of Establishment:-

Location of the College:-

A2. Address:-

City:-

State:-

Pin Code:-

Website:-

E-mail:-

STD Code:-

Phone No:-

Fax STD Code:-

Fax:-

A3. Head of the Institution:-

Name:-

Designation:-

Status of Appointment:-

A4. Contact details of Head of the Institution:-

STD Code:-

Telephone No:-

Mobile:-

E-mail:-

Fax STD Code:-

Fax No:-

A5. Name of the Affiliating University:-

Address:-

City:-

State:-

Pin Code:-

Website:-

E-mail:-

STD Code:-

Phone No:-

Fax STD Code:-

Fax:-

A6. Type of the Institution:

University

Deemed University

Autonomous

Any other (Please Specify)

Affiliated

A7. Ownership Status:

Central Government	<input type="checkbox"/>	State Government	<input type="checkbox"/>
Grant-in-Aid	<input type="checkbox"/>	Self financing	<input type="checkbox"/>
Trust	<input type="checkbox"/>	Society	<input type="checkbox"/>
Section 25 Company	<input type="checkbox"/>	Any Other (Please specify)	<input type="checkbox"/>

Provide Details:

A8. Students Admissions (Institute level considering all programs):

Item	CAY	CAYm1	CAYm2	Total
Sanctioned intake				
Number of students admitted				
% of Students Admitted over last three assessment years (Total Admitted/Sanctioned Intake)				

Table A8

CAY: Current Academic Year

CAYm1: Current Academic Year minus 1=Current Assessment Year

CAYm2: Current Academic Year minus 2=Current Assessment Year minus 1

A9. Campus Information:-

Does the College have its own building:-

Sports Complex:-

Canteen and Hostel (If any):-

Medical Room:-

Computer Laboratories:-

Counselling and guidance:-

Placement:-

A10. Names of programs offered by the College:-

UG:-

PG:-

Note: - Please mention department wise.

A11. Programs to be considered for Accreditation vide this application.

S. No.	Program Name

Table A11

PART B- Program information as per point A11

(To be filled separately for all the programs applied for)

B1. Provide separate Information for each program applied for:-

Sr. No.	Name of the program to be considered	Year of Start	Initial Intake	Increase/decrease in intake, if any (mention the no. of seats increased/decreased, also)	Year of increase	AICTE Approval Letter No.	Accreditation Status*

Table B1

*** Write applicable one:**

- Applying first time
- Granted provisional accreditation for two/ three years for the period(specify period)
- Granted accreditation for 5 /6 years for the period (specify period)
- Not accredited (specify visit dates, year)
- Withdrawn (specify visit dates, year)
- Not eligible for accreditation
- Eligible but not applied

B2. Student Admissions (Program specific):-

Item	CAY	CAYm1	CAYm2	Total
Sanctioned intake				
Number of students admitted				
% of Students Admitted over last three assessment years (Total Admitted/Sanctioned Intake)				

Table B2

CAY: Current Academic Year

CAYm1: Current Academic Year minus 1=Current Assessment Year

CAYm2: Current Academic Year minus 2=Current Assessment Year minus 1

B3. Information of Faculty

Please provide the list of faculty in the department as per the below format since CAYm3 (2013-14), please provide separate list for each year till CAY

S. No.	Name	PAN No.	Qualification	Area of Specialization	Designation	Date of Joining	Date on which Designated as Professor/Associate Professor	Currently Associated (Y/N)	Nature of Association (Regular/Contract/Adjunct)	Date of Leaving (In case Currently Associated is "No")
1.										
..										
N										

Table B3

B3.1.

S. No.	Designation/Numbers	Number of Faculty in the department*	
		CAY	CAYm1
1.	Professor		
2.	Associate Professor		
3.	Assistant Professor		
4.	Number of Ph.D.		

Table B3.1

*Atleast one Professor or Associate professor should be available exclusively for the program under consideration

B3.2. Detail of Head of the Department for the program under consideration:

Name:-

Qualification:-

Ph.D.

Others

B.4. Student Faculty Ratio (to be calculated as per the Department):-

(No of Faculty as per the sanctioned intake)

No. of UG Programs in the Department (n): _____

No. of PG Programs in the Department (m): _____

No. of Students in UG 1st Year= **u1**

No. of Students in UG 2nd Year= **u2**

No. of Students in UG 3rd Year= **u3**

No. of Students in UG 4th Year= **u4**

No. of Students in PG 1st Year= **p1**

No. of Students in PG 2nd Year= **p2**

No. of Students = Sanctioned Intake + Actual admitted lateral entry

(The above data to be provided considering all the UG and PG programs of the department)

S = Number of Students in the Department = UG1 + PG1 + PG2

F = Total Number of Regular Faculty Members in the Department

Student Faculty Ratio (SFR) = S/F

Year	CAY	CAYm1	CAYm2
u1.1			
u1.2			
u1.3			
u1.4			
UG1	u1.1+u1.2+u1.3+u1.4	u1.1+u1.2+u1.3+u1.4	u1.1+u1.2+u1.3+u1.4
p1.1			
p1.2			
PG1	p1.1+p1.2	p1.1+p1.2	p1.1+p1.2
....			
pm.1			
pm.2			
PGm	pm.1+pm.2	pm.1+pm.2	pm.1+pm.2
Total No. of Students in the Department (S)	UG1 + PG1 + ...PGm=S1	UG1 + PG1+... + PGm= S2	UG1 + PG1+... + PGm= S3
No. of Faculty in the Department (F)	F1	F2	F3
Student Faculty Ratio (SFR)	SFR1=S1/F1	SFR2= S2/F2	SFR3= S3/F3
Average SFR	SFR=(SFR1+SFR2+SFR3)/3		

Table B3.3

Note:

Minimum 75% should be Regular/ full time faculty and the remaining shall be Contractual Faculty/Adjunct Faculty/Resource persons from industry as per AICTE norms and standards. The contractual faculty will be considered for assessment only if a faculty is drawing a salary as prescribed by the concerned State Government for the contractual faculty in the respective cadre and who have taught over consecutive 2 semesters.

B5. Placement Ratio

Year	N=No. of Students admitted in 1st year	Z=(No. of students Placed + selected for higher studies + opted Entrepreneurship)	Placement Ratio (Z/N)
CAYm1			
CAYm2			
CAYm3			
Average Placement Ratio			

Table B5

B6. Faculty Cadre Proportion:-

(The reference Faculty cadre proportion is 1:2:6 i.e.; Professor: Associate professor: Assistant professor)

Year	Professors		Associate Professors		Assistant Professors	
	Required F1	Available	Required F2	Available	Required F3	Available
CAY						
CAYm1						
CAYm2						
Average Numbers	RF1=	AF1=	RF2=	AF2=	RF3=	AF3=

Table B6

Compliance status to Pre-Visit Qualifiers

S.N.	Pre Visit Qualifiers	Current Status	Compliance Status (Complied/Not Complied)
Essential Qualifiers			
1	Vision, Mission & PEOs i. Are the Vision & Mission stated in the Prospectus / Website? ii. Are the PEOs of the Program listed in the Prospectus / Website?		
2	Whether approval of AICTE for the programs under consideration has been obtained for all the years including current year		
3	Whether admissions in the undergraduate programs under consideration has been more than or equal to 75%* for previous three academic years including current academic year.	% Admission	
5	Whether student faculty ratio in the department of the program under consideration is better than or equal to 1:15 averaged for previous three academic years including current academic year.	SFR	
6	Whether at least one Professor and one Associate Professor available in the respective Department during previous two academic years including current academic year.		
7	Whether the placement ratio(Placement + higher studies) is greater than 40% (average of the last three assessment years)		
8	Whether two batches have passed out in the programs under consideration		
9	Whether HODs possess Ph.D. degrees		
10	Whether number of available faculty with Ph.D. in the department is greater than or equal 30% (including the director) of the required number of faculty for previous two academic years including current academic year.		

*Total number of students admitted in first year in the respective program minus number of students migrated to other programs/ institutions plus the number of students migrated to this program divided by the sanctioned intake in the respective program.