

# NATIONAL BOARD OF ACCREDITATION

## Pro-forma for Pre-Qualifiers for Undergraduate Pharmacy Programs

### PARTA- Profile of the Institute

**Name of the program applied for:**

**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  State Government   
 Grant-in-Aid  Self financing   
 Trust  Society   
 Section 25 Company  Any Other (Please specify)

**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:-**

**Counseling 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:-**

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

**Table B1**

#### **\* Write applicable one:**

- Applying first time
- Granted 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):-**

<b>Item</b>	<b>CAY</b>	<b>CAYm1</b>	<b>CAYm2</b>	<b>Total</b>
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. Number of Faculty in the department

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 1<sup>st</sup> Year= **u1**

No. of Students in UG 2<sup>nd</sup> Year= **u2**

No. of Students in UG 3<sup>rd</sup> Year= **u3**  
 No. of Students in UG 4<sup>th</sup> Year= **u4**  
 No. of Students in PG 1<sup>st</sup> Year= **p1**  
 No. of Students in PG 2<sup>nd</sup> 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**

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

Table B3.3

**Note:**

1. All faculty whether regular or contractual (except Part-Time), will be considered. The contractual faculty (doing away with the terminology of visiting/adjunct faculty, whatsoever) who have taught for 2 consecutive semesters in the corresponding academic year on full time basis shall be considered. However, following will be ensured in case of contractual faculty:
  - a. Shall have the AICTE prescribed qualifications and experience
  - b. Shall be appointed on full time basis and worked for consecutive two semesters during the particular academic year under consideration.
  - c. Should have gone through an appropriate process of selection and the records of the same shall be made available to the visiting team during NBA visit.

**B5. Placement Ratio**

Year	N= Total No. of Final Year Students	Z= (Number of students placed in Industries/ Hospitals/ Government sector through on/off campus recruitment or opted for Entrepreneurship + No. of students admitted to higher studies with valid scores in various qualifying exams)	Placement and Higher Studies Ratio (Z/N)
CAYm1			
CAYm2			
CAYm3			
<b>Average Placement and Higher Studies Ratio</b>			

**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						
<b>Average Numbers</b>	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)
<b>Essential Qualifiers</b>			
1	<b>Vision, Mission &amp; PEOs</b> <b>i. Are the Vision &amp; Mission stated in the Prospectus / Website?</b> <b>ii. Are the PEOs of the Program listed in the Prospectus / Website?</b>		
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 50% * 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 1:20 averaged for previous three academic years including current academic year.	SFR	
6	Whether at least one Professor or 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 20% of the required number of faculty averaged for previous two academic years including current academic year.		
<b>Desirable Parameters</b>			
1	Whether department has program assessment and quality improvement committee. If so, its constitution and mandate.		
2	Whether the departments under consideration receives separately earmarked funds for i. Maintenance of Laboratory/computational facilities(recurring funds) ii. Up-gradation of laboratory/computation facilities(non-recurring funds)		
5	Whether admissions in the undergraduate programs under consideration has been more than 60% (average of the last three assessment years)		

\*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.