# Annexure X

# Part A

# Evaluator's Visit Report

## Undergraduate Engineering Program
## TIER-I

### 2nd Cycle Accreditation

**(Applicable for all those programs which have been granted full accreditation of 6 years under Tier I)**

## Name of the Institution

...............................................................................................

## Name of the Program

.........................................................................................

## Visit Dates

...............................................................................

## Program Evaluator Summary

Overview

The Expert team of National Board of Accreditation (NBA) conducted a three-day accreditation visit from _____to_____**(name of institution)_____**, to evaluate UG Engineering program **(name of the program)**.                         .

Pre-visit meeting of the expert team was held on at_____to exchange the respective findings with the evaluation team members, based on review of Self-Assessment Report (SAR) and the pre-visit evaluation reports.

During the visit, the visiting team met with Head of the Institution/Dean_____. The briefing on the institution was given by_____and on the program was given by the **(Name of the respective Head of the Department/Program Coordinator)**. The respective program evaluators also visited the various facilities of the program. Apart from comprehensive review of documental evidences pertaining to various accreditation criteria, the visiting team also held meeting and discussions with the following stakeholders (kindly tick).

| | | | |
|---|---|---|---|
| Faculty | ☐ | Alumni | ☐ |
| Employers | ☐ | Parents | ☐ |
| Staff members | ☐ | Students | ☐ |

The Program Evaluation Team found that (general findings about the program to be mentioned)

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____.

## Program Details

| Name of the Program: | | | | | |
|---|---|---|---|---|---|
| **Year of Commencement** | | | | | |
| **Student** | Year | Sanctioned Intake | Actual Admitted (without Lateral Entry) | | |
| | CAY (20_ _ - 20 _ _) | | | | |
| | CAY m1 (20_ _ - 20 _ _) | | | | |
| | CAY m2 (20_ _ - 20 _ _) | | | | |
| | Total Students in the Programme 1st to Final Year | | | | |
| | Average of the CAY, CAY m1 and CAYm2 | | | | |
| **Faculty** (Attach a Copy of faculty list compared with Time Table) | | | **CAY** | **CAYm1** | **CAYm2** |
| | **Regular** | Professor | | | |
| | | Associate professor | | | |
| | | Assistant professor | | | |
| | **Contractual** | Professor | | | |
| | | Associate professor | | | |
| | | Assistant professor | | | |
| | **No. of Ph.D available in the dept.** | | | | |
| | **Student - Faculty ratio (averaged over CAY, CAY m1 and CAYm2) (Refer criterion-5.1)** | | | | |
| **Previous Accreditation (if any)** | **First accreditation** | No. of years accredited for | | | |
| | | With effect from | | | |
| | **Previous accreditation** | No. of years accredited for | | | |
| | | With effect from | | | |

## CAY: Current Academic Year

## CAYm1: Current Academic Year minus 1= Current Assessment year

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

**Note:** All the 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 for the purpose of calculation in the Faculty Student Ratio. However, following will be ensured in case of contractual faculty:

i. Shall have the AICTE prescribed qualifications and experience.

ii. Shall be appointed on full time basis and worked for consecutive two semesters during the particular academic year under consideration.

iii. 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.

**Explicit observations about the program**

(Please use additional sheets if necessary to elaborate)

**Program title**_____

**Strengths:**

1. _____

2. _____

3. _____

**Concerns:**

1. _____

2. _____

3. _____

**Weakness/Areas of improvement:**

1. _____

2. _____

3. _____

**Deficiencies:**

1. _____

2. _____

3. _____

**Other Observations, if any:**

1. _____

2. _____

3. _____

# Information for Evaluation
Award of Accreditation - Second Cycle Accreditation
of
UG Engineering Programs in TIER I (UG)

**i)** **Accreditation for Six years will be accorded to a program on fulfilment of the following requirements:**

| Y | C | W | D |
|---|---|---|---|
| >=5 | <=1 | 0 | 0 |

1. There should not be any "Deficiency" or "Weakness" in any of the criteria and at least five criteria must be fully compliant with only "Concern" in the remaining criterion.

2. Number of available Ph.D. in the department should be greater than or equal to 30 per cent of the required number of faculty averaged over two academic years i.e. Current Academic Year (CAY) and Current Academic Year Minus One (CAYM1).

3. The admissions in the UG program should be more than or equal to 60 per cent, averaged over three academic years (including lateral entry), i.e., Current Academic Year minus One (CAYm1), Current Academic Year minus Two (CAYm2) and Current Academic Year minus Three (CAYM3).

4. Faculty Student Ratio in the department should be less than or equal to 1:20 averaged over three academic years i.e. Current Academic Year (CAY), Current Academic Year Minus One (CAYM1) and Current Academic Year Minus Two (CAYM2).

5. At least 2 Professors or 1 Professor and 1 Associate Professor (on regular basis) with Ph.D. degree should be available in the respective department for two academic years i.e. Current Academic Year (CAY) and Current Academic Year Minus One (CAYM1).

6. HoD of the program under consideration should possess Ph.D. degree in the Current Academic Year(CAY)

**ii)** **Accreditation for Three years will be accorded to a program on fulfilment of the following requirements:**

| Y | D |
|------|---|
| >=3 | 0 |

**1**   There should be at least three criteria fully compliant with zero (0) "Deficiency" in the  remaining criteria.

**2**   The admissions in the UG program under consideration should be more than or equal to 60 per cent, averaged over three academic years (including Lateral Entry), i.e., Current Academic Year Minus One (CAYm1), Current Academic Year Minus Two (CAYm2) and Current Academic Year Minus Three (CAYm3).

**3**   At least 2 Professors or 1 Professor and 1 Associate Professor (on regular basis) with Ph.D. degree should be available in the respective department for two academic years i.e. Current Academic Year (CAY) and Current Academic Year Minus One (CAYM1).

**4**   The faculty student ratio in the department under consideration should be less than or equal to 1:25 averaged over three academic years i.e. Current Academic Year (CAY), Current Academic Year Minus One (CAYM1) and Current Academic Year Minus Two (CAYM2).

**5**   Number of available Ph.D. in the department should be greater than or equal to 20 per cent of the required number of faculty averaged over two academic years i.e. Current Academic Year (CAY) and Current Academic Year Minus One (CAYM1).

**6**   HoD of the program under consideration should possess Ph.D. degree in the Current Academic Year (CAY).

**iii)** **No Accreditation of the program**

If the program fails to meet the criteria for award of accreditation for three years, it is awarded "Not Accredited" status.

**Major Accreditation Criteria:**

| S. No. | Criteria | Max. Marks | Marks Awarded | Grade (Y, C, W, D) | Remarks |
|--------|----------|------------|---------------|--------------------|---------|
| 1. | Course Outcomes and Program Outcomes | 100 | | | |
| 2. | Program Curriculum and Teaching – Learning Processes | 75 | | | |
| 3. | Students' Performance | 75 | | | |
| 4. | Faculty Information and Contributions | 100 | | | |
| 5. | Resources | 75 | | | |
| 6. | Continuous Improvement | 75 | | | |
| | TOTAL | 500 | | | |

Signature
(Program Evaluator 1)

Signature
(Program Evaluator 2)

**Declaration of Conformity with Evaluator's Report by the Team Chair**

**I agree with the observations of the Program Evaluators on each criterion.**

**Or**

**I agree with most of the observations of the Program Evaluators. However, I have following comments to make on certain criterion:**

| Criteria | Comments |
|----------|----------|
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|          |          |
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |
|          |          |

_____

Signature

(Chairperson)