Performa for submission of information for Membership of the Association for Institution

1. Name of the Universities/Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2.  Year of Establishment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.   Name of the Vice Chancellor/Chairman/Director:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
In case of Vice Chancellor/Director:  
Date of Appointment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Completion of present term\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
   
Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(pin code) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Telephone No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Off)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Res)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Mob)   
Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Website:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
4.  Institute is  
a) Public Funded                         Yes/No

b)  Self Financed                          Yes/No  
  
If Self Financed, Source of income  
  
   
  
5.  Academic Programmes

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| UG Programme | Yr. of Start | PG Programme | Yr. of Start | Research Cells | Yr. of Start |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

6. Admission Modes                                                 UG PG Research

a)  Merit  
b)  Entrance Test                         Yes/No

7. Performance of Students during the last three years: (Pass out %)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Year | Pass out % | UG | | PG | |
|  |  | Gen | Professional | Gen | Professional |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

8. Thrust Areas of Research

9. Facilities available to students  
  
a)    Canteen/ Playground/ Indoor Games/ Swimming Pools/ Health Club/ Recreation Facilities/ Others  
  
10. Facilities for Youth affairs/ cultural activities-Auditorium/ Instruments required for cultural activities

11. Institution’s participation in Cultural/Sports activities-    Yes/No  
If yes please enclose a list of Prizes of Events (Runner/Winner)  
  
12.   Extension programs in the Institute  
NSS/ NCC/ Adult Education/ Community Service/ Rural Development/ Community Health    
Awareness/ HIV/ AIDS Awareness  
  
13. Strength points of the University/Institution (Enclose attachment)

 14. Specific achievements of the Institution  during the last three years(Enclose attachment)

15.Reasons for Joining CEE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16. Fee Details:    Annual Rs.25,000/-   Membership for five year  Rs. 75,000/-

17. Mode of Payment: Cash/ Draft/ Cheque     
  
Details:- Bank Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Cheque or Draft no:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Amount:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

18. Any other relevant information (If necessary, please attach extra sheets).

Enclosures to be Attached: Detailed Profile of University/ Institute

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
                       
  
   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ For Office Use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

S.No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Approval Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
Approved By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
 Corporate Address:  505, Pearl best heights 2, Netaji Subhash Place, Pitam pura, New Delhi110034.

 Ph: 01145136807