



## Affiliation

Year of Establishment

Placeholder

Date of First Affiliation

DD/MM/YYYY

Details of Last Affiliation Letter (with year of approval)

Placeholder

## Registrar details

First Name

Placeholder

Middle Name

Placeholder

Last Name

Placeholder

Qualification

Placeholder

Date of Appointment

DD/MM/YYYY

Date of Joining

DD/MM/YYYY

Phone Number

Placeholder

Email ID

email123@gmail.com

Approved by the University



Yes



No

Name of Approved University

Placeholder

Letter of Approval



Insert File

Save

View

## About Institute

Institute Type

Placeholder

Minority Institute



Yes



No

Minority Type

Placeholder

Local Managing Committee constituted  
(as per Maharashtra University Act 1994)



Yes



No

Date of Last Meeting

DD/MM/YYYY

Governing Body constituted



Yes



No

Date of Last Meeting

DD/MM/YYYY

## Academic Calenders

First Term



Insert File

Save

View

Second Term



Insert File

Save

View

AICTE approved Existing courses

Placeholder




Academic Year

Placeholder


### Under Graduate

Sr. no.	Name of Course	Sanctioned Intake (Year wise)					Actual Admitted (Year wise)				
		1st	2nd	3rd	4th	Total	1st	2nd	3rd	4th	Total

 Add another field

### Post Graduate

Sr. no.	Name of Course	Sanctioned Intake (Year wise)					Actual Admitted (Year wise)				
		1st	2nd	3rd	4th	Total	1st	2nd	3rd	4th	Total

 Add another field

### First affiliation for existing courses

#### Under Graduate

Sr. no.	Name of Course	Year of Affiliation	AICTE Approval no.	Government G.R. no.	University Affiliation Letter no.

 Add another field

#### Post Graduate

Sr. no.	Name of Course	Year of Affiliation	AICTE Approval no.	Government G.R. no.	University Affiliation Letter no.

 Add another field

## New Courses / Increase in Intake

Academic Year

## Under Graduate

Sr. no.	Name of Course	Proposed Intake (Year wise)				
		1st	2nd	3rd	4th	Total

 Add another field

## Post Graduate

Sr. no.	Name of Course	Proposed Intake (Year wise)				
		1st	2nd	3rd	4th	Total

 Add another field

### Courses for Extension of Affiliation

Academic Year

### Under Graduate

Sr. no.	Name of Course	Proposed Intake (Year wise)				
		1st	2nd	3rd	4th	Total

 Add another field

### Post Graduate

Sr. no.	Name of Course	Proposed Intake (Year wise)				
		1st	2nd	3rd	4th	Total

 Add another field

### Faculty Strength on existing programs

Sr. no.	Name of Course	Sanctioned Intake	Faculty Strength	
			Required	Approved

 Add another field

Save

Submit

Next