

University of Delhi Faculty Detail Performa 2017-21



1. Personal Details

Name	Ms. Shuchita Verma	
Designation	Assistant Professor	99
Department	Commerce	100
Email	shuchita@dr.du.ac.in	
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		364

2. Educational Qualification

2. Educational Quantication										
Degree	Institution	Year								
MBA finance	Amity University	2010								
BA(H) Economics	DU	2007								
Senior Secondary School Examination	CBSE	2004								

3. Full Time Research Experience

Designation	Institute	Time period	Nature of Appointment

4. Full time Teaching Experience

4. Full tille leatill	16 Experience			
s.no	Designation	Institution	Time Period	Nature of Appointment
1	Assistant Professor	Daulat Ram College, University of Delhi	03,January 2013 - Till date	Adhoc

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Total			
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5. Administrative Assignments

Name of Institute	Designation	Status	Time period	Experience
Daulat Ram College	Member, Tanjagna Quiz socety	Adhoc		
	Member,Enabli ng unit			

6. Areas of Interest: Economics, Mathematics, Statistics

7. Subjects Taught

7 1 0 0 m J 0 0 0 0 1 m m B 1 1 0				
S.No	Course	Subject Taught	Semester	Year
1	B.com hons	Business mathematics	4	2
2.	B.com	Business Organisation and Management	1	1

8. Research Guidance Given:

o. nescan								
Name o	Gend	Degree	Date	Super	Univer	Title of Thesis	Date of	Dat
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		guidan	ation	erviso			thesis	rd
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9. Deta	ails of refre	sher/orie	ntatio	n cou	rse/res	sea	rch m	ethodo	logy/w	orkshop	/syllabi	us up-	-grad	ation/
	aching —leai	rning-eva												
S.No.	Details		P	lace	Po	erio	od	Year	Spe	onsoring	/Organi	sing A	genc	y
					Fron	m	То							
	1													
10 MO	OCs complet	ed with e-	certific	ation										
S.No.	Details	Subject		ertifica	ation		Date of	f	Leve		Ye	ear	E-c	ertificati
	of	,	рі	rovidir	ing		certific			PG/Other				no.
	МООС		ag	gency		_								
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11. Cont	ribution tow	ards deve	lopme	nt of e	e-conte	nt/	моос	s in 4- c	uadran	ts				
S.No.	Details	Quadr	a	No.		Co	ourse	Spon	sori	Year	Level	0 (0::		
	of E contents	nts develo	p	Mod	lules			ng agen	су		(UG/P	G/Oth	ner)	
	/	ed							•					
	MOOCs in 4-quadrant													
	S													
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12. Contribution towards conduct of MOOCs

S.No.	Details of MOOC	Subject	Sponsoring agency	Level (UG/PG/Other)	Year	E-certification no.

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13. Organising seminars/ conferences/workshops, other college/university activities.

S.No.	Year	Details	Place	Perio		Sponsoring/Organising Agency
				From	То	

14. Creation of ICT mediated Teaching Learning pedagogy and content and development of new and

innovative courses and curricula

Development of Innovative Pedagogy e module

S.No.	Name of the Module	Subject	Stream	Organizati on for which it was developed	Year	Level (UG/PG/Other)	Weblink

S.No	Name of Research Project	Fundi Agend	ng	National/I	nternational	Dura	ation	Amount Sanctione		Amount Received
S.No	Name of Research Project	Fundi Agen		National/	International	Dura	ation	Amount Sanction	ed	Amount Receive
					PA GE					
7. Books S.No	Autho (year) of Bo Publis ISBN N	Name ok. her,	Puk	olisher	Date of publishing		uthor	ed/Edited	ISB	N No

S.No	Author(year) Title of Chapter/Article,in Edited Book: Title of book, Publisher, Vol, Page no	Date of publishing	Authored/Edited	ISSN No

19. E- Modules Published

S.N o	Author (year) Title, Module, Subject ,Organisation, Weblink	Date of publis hing	Authored /E dited	Link

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20. Research Publications:

S.No	Author/s(Year) Journal Name, Vol, series, pg no, ISSN	Date of Publishing	Impac t Facto r	UGC Care List Journal Yes/No	Scopus Inexed Journal Yes/No
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21. Conference Proceedings publication

S.no	Title of Paper (Year) Title of conference proceedings , Vol, series, Pg no , ISBN	Date of Publishing	Peer Review ed Yes/No	Venue of confere nc e

22. Conference Attended and Paper presentation

s.no	Type of Event	Name of Event	Venue of conference	Date of conference	Attend ed only Yes/no	paper presen ted Yes/N o	Title of Paper Prese nte d

23. Resource Person (Invited Lecture/Paper Presentation/ Chairing session/judging/ educational trips)

<u>23. Ke</u>	source Person	(invited Lecture)	Paper Pres	entation/ Chai	ring session/juaging	g/ education	onai trips)
S.N o	Type of Event	Name of Event	Venue	Date of Event	State your role: Convener/Me mb er organizing committee/ Speaker/ Coordinator	Dura tio n of Activity	No of particip an t in the program m e

24. Awards Won

S.No	Name of Award	Awarding Agency	Government/ NGO/ International/Priv ate	Recogniti on area	Date of award	Type of Honor received

25. Extension Activity (Community related program)

S.No	Type of Activity	Centre and Venue	Title of Event	Role in the event	Date/period of Event	No of members of the community/student s /Faculty benefitted

26. Membership of Professional Bodies

S.No	Type of Membership	Organisation	Year of Membership

Signature

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