

Institute Details Form

Name of the Institute : **institute1**

Name of the Department : **7**

Coordinator of the Proposed Program : **lkkjljkjasd**

Type of Institution : **Central University** ▼

University Ranking as per UGC : **8989**

Years of Establishment **2019**

Approx. Number of Students **7**

Details of the Course:-

Any Collaborative Institute **No** ▼

Experience in Energy related courses : **1**

A) Since when the course being run : **2020-04-30**

B) Number of Seats in each of the course : **7**

C) Specialization offered : **7**

D) If any industry collaboration is there, if so details thereof : **7**

E) If placement service is being provided : **no**

F) Any other details : **ASMAKS**

Sponsored Projects in the area of Energy, Environment and Renewable Energy : **ASDASLKDJ**

Fellowship slot requirement :

M.Tech. **1**

JRF **3**

SRF **3**

M.SC. **3**

RA **0**

PDF **0**

☒ We Certified that the information have been verified and correct

Name and Signature of Department with Seal

Signature

Name and Signature of Dean with Seal

Signature

Name and Signature of Registrar with Seal

Signature