APPLICATION NO:	



PERIYAR UNIVERSITY

SALEM - 636 011, TAMIL NADU

NAAC Reaccredited A Grade – State University – NIRF Rank 68 Phone: 0427-2345766, 2346268, 2346269 Fax: 0427-2345124 Website: www.periyaruniversity.ac.in

APPLICATION TO START NEW PROGRAMME (S) IN THE AFFILIATED COLLEGES FOR THE ACADEMIC YEAR 2020 - 2021

111 1 121111 2	D COLLEGED I ON IIII		020 2021
1. Names of the Co	llege	:	
2. Year of Starting		:	
3. Status		: Government/Aid	led/Self-Financing
4. Name of the Prin	acipal	:	
5. Qualification app	proval of the Principa	•	ot Obtained se copy of approval)
6. Autonomous or N	Jon-Autonomous	:	
<u> </u>	s /Subject/Group pro courses in the order o	-	in the College:
8. Subject/ Progran	nmes for which the co	ollege is affiliated at 1	present:
Programme	Subject	Sanctioned Strength	Admitted during 2019-2020

9. Need for starting the Programme (s)

	the other Colleges in the District nme (s) referred to in item 5 above:	which have got affiliation for the new
Name o	of the College	Distance from the College under reference
	her all the conditions prescribed by ing Programmes have been fulfille	the University for the affiliation of d:
b. If not l	ist out the conditions which are ye	t to be fulfilled with reasons:
or pare	nts:	collections of donations from the students
13. Buildi	Whether the existing building t	Facilities are adequate for the proposed new requirement. It not, the arrangement to be ional accommodation:
ii)	<u> </u>	tems of expenditure required for the new coposed to be met by the Management:
Estima	ated Requirements of facilities	Amount actually to be provided for by the Management

14. Library

Name of the Librarian Library books

Name of the Programme	Number of books required for the proposed Programme	Number of books available for the proposed Programme	Number of books to be purchased for the proposed Programme

Furniture

furniture's required	furniture available	Number of furniture to be purchased

15. Laboratory Facilities

a) Space

Name of the Programme	Space required for the lab	Space available for the lab	Remarks

b) Equipment/Apparatus

<u> </u>	-FF		
Name of the	Equipments/Apparatus	Equipments/Apparatus	Equipments/Apparatus
Programme	required for the	available for the	to be purchased for the
	proposed Programme	proposed Programme	proposed Programme

١,		1	. •
0	۱ I	oh.	A coretante
L	, ,	aı)	Assistants

Name of the Programme	No. of Lab Assistants available	No. of Lab Assistants required for the proposed Programme

16. Hostel

17. Details of additional staff required for the proposed new Programme(s) taking into account the overall work load of the various Programmes including the existing Programmes:

a) Teaching Staff:

Subject	Category	No. to be appointed for	Annual Estimated
		the proposed	expenses
		Programme	

b) Non-teaching staff:	
Cadre No. to be appointe	d
18. Whether the staff of the college are to be paid the scale of pay as a the University Grants Commission/AICTE:	ecommended by
19. Other Remarks:	
I hereby declare that the particulars furnished above are conserved Programme(s) will not be started without getting affiliation from the prior consent of the Director of Collegiate Education/AICTE, New Director the Programme(s) for which such permission is required.	he University. The
SECRETARY/ Complete:	CORRESPONDENT