

**PROFORMA FOR THE INSPECTION REPORT FOR DIPLOMA COURSES**  
**ACADEMIC SESSION 201 -201**

Date of inspection \_\_\_\_\_ Place \_\_\_\_\_ Time \_\_\_\_\_

(Observation of the expert committee based on the documents furnished and physical verification of facilities.)

1. Name & address of the Institution:

Name : \_\_\_\_\_

Address : \_\_\_\_\_

2. The land area available for the institution \_\_\_\_\_

\* Availabilities of clear demarcations of the institution either by a boundary wall or by a barbed wire fencing.

Yes	No
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\* Whether Land Use Certificate for educational purposes has been issued by The Competent Authority for the entire land and is in order.

Yes	No
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\* Availability of all weather approach road to the Institution.

Yes	No
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\* Suitability of location and surrounding of land for an academic institution.

Yes	No
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\* Whether the said piece of land is mortgaged to any other agency

Yes	No
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\* Availability of master plan for the whole campus indicating boundary of land and building of proposed institution.

Yes	No
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3. **Building Plan & Built Up area.**

\* Whether Building plan duly approved by the Competent Authority has been Submitted.

Yes	No
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\* Whether Building Plan has survey nos./ identification of land on it.

Yes	No
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\* Whether construction has been carried out as per the approved building plan

Yes	No
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**Details of Built Up Area**

Quality of constructions (excellent/very good/good/satisfactory/poor) in terms of

- \* Plastering :
- \* Painting :
- \* Flooring :

Details of total Built-up Area(Sq.m)

Particulars	Requirement as per AICTE Norms	Available	Shortfall, if any
Instructional Carpet Area			
Administrative Carpet Area			
Circulation and Other Area			
Total			

Note:- Circulation of other area include Toilet, Corridors, staircases, common areas etc. Details of instructional area (sq.m.):

Particulars	Requirements as per AICTE Norms			Available			Shortfall, if any Area in Sqm.
	Number	Area of each	Total area	Number	Area of each	Total area	
Classrooms							
Tutorial Rooms							
Drawing Hall (+)							
Library							
Computer Lab							
Lab./Workshop							
Total							

(+) Studio Hall is required in case of Architecture and Town Planning institutions.

(a) Total constructed area at present:

Ground Floor \_\_\_\_\_ Sq.m.+ First Floor \_\_\_\_\_ sq.m.+Second Floor \_\_\_\_\_ Sq.m.= Total \_\_\_\_\_ Sq.m.

(B) Area proposed to be constructed in future:

Coming next year \_\_\_\_\_ Sq.m.

Coming next 2 year \_\_\_\_\_ Sq.m.

Furniture for professional course

Yes	No
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Teaching aids (black board & audio visual aids):

Yes	No
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**Adequacy of Administrative area**

\* Availability of furnished Principal Offices

Yes	No
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\* Availability of furnished staff room

Yes	No
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\* Availability of seprate cabins in staff room for faculty 

Yes	No
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\* Availability of furnished administrative staff office 

Yes	No
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**Details of circulation area and essential amenmities - Availability of**

\* Permanent electrical connections(\*) 

Yes	No
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\* Electrical generator 

Yes	No
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\* Water supply connection(\*) 

Yes	No
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\* Proper drainage connection (\*) 

Yes	No
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\* Canteen facility at functional stage 

Yes	No
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\* Toilets (boys) 

Yes	No
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\* Toilets (girls) 

Yes	No
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\* Common room(girls) 

Yes	No
-----	----

\* Common room (boys) 

Yes	No
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\* Hostel facility (#) (girls) 

Yes	No
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If Yes,capacity

\* Hostel facility (#) (boys) If Yes,capacity

(\*) Expert Committee to verify documentary evidence

(#) If no hostel facilities is available, whethr arrangements has been made for boarding and loading of students in vicinity of the institution, if yes mode of travels from the place of stay to the institution.

4. Information about the Teaching Faculty of the Instutition (Furnish detailed information about the teaching faculty of the institution as per enclosed proforma) (Appendix-1)

(a) Total Intake of students at present \_\_\_\_\_nos.

(b) Total number of students in the institution\_\_\_\_\_nos.

(c) Total number of regular teachers at present \_\_\_\_\_nos.

(d) Total number of teachers on Part time basis/visiting faculty basis who are not regular\_\_\_\_\_nos.

(e) Total number of teachers at present (c)+(d)\_\_\_\_\_nos.

\* Whether the selection committee for appointement if staff has been conducted.

(Kindly check the list of candidates applied, called and appeared for interview and proceedings of the selection committee meeting)

Yes	No
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\* Whether all papers related to advertisement/recruitment/identification of faculty were made available to the expert committee.

Yes No

\* If yes, whether they are satisfactory as per norms.

Yes No

\* Whether faculty is identified and consent for joining institution is Obtained from the entire faculty

Yes No

\* Whether full time Principal has been appointed

Yes No

Shortfall/deficiency as per AICTE/RGPV norms \_\_\_\_\_

Specific observation of the expert committee. \_\_\_\_\_

**5. Information about the supporting staff of the Institution (as per enclosed proforma )**  
**(Appendix-2)**

(a) Total Number of Supporting Staff(Technical) in the institution \_\_\_\_\_ nos.

(b) Total Number of Supporting staff(Non-Technical) in the institution \_\_\_\_\_ nos.

Shortfall/deficiency as per AICTE/RGPV norms \_\_\_\_\_

Specific observation of the expert committee. \_\_\_\_\_

**6. Information about Library of the Institution (enclose the list of books)**

Particulars	Requirement as per AICTE Norms	Available	Shortfall, if any
Number of title of books			
Numbers of volumes books			
Numbers of Journals (National+International)			

The future plans for Automation of the library of the institutions:

\*Availability of Library facilities for the proposed Institution

Yes No

\* Whether the Library is fully furnished

Yes No

\* Whether Photocopier machine is available in the Library

Yes No

\*Whether the Stacking and Seating Area is adequate

Yes No

\* Whether full-time librarian has been appointed(if yes)

Qualification\_\_\_\_\_pay Scale\_\_\_\_\_

Yes No

\* Whether the title of books available are relevant to the syllabus

Yes No

\* Availability of vouchers and payment receipts indicating proof.

Yes No

\* Whether books and journals have been procured, stamped and entered

In the Accession Register(The Expert to kindly affix their signatures on The last page of accession Register)

Yes No

Shortfall/deficiency as per AICTE/RGPV norms\_\_\_\_\_

Specific observation of the expert committee.\_\_\_\_\_

**7. Information about laboratories/workshop required as per the syllabus of RGPV (Name of lab with equipments must be given in table course/department wise)(as per enclosed Proforma)(Appendix-03)**

**Please verify bills vouchers & payments receipts for the purchase equipment.**

\* Mention the laboratory/workshop facilities for the proposed Institution

(if shared, given details\_\_\_\_\_)

\* Whether laboratories and workshop possess relevant equipments as per the Ist year syllabus.

\* Whether equipment procured are at the operational stage

\* Availability of vouchers and payment receipt indicating proof of purchase

\* Availability of Stock Register of equipment (The Experts to kindly affix their signature on the last page of Stock Register)

Shortfall/deficiency as per AICTE/RGPV norms\_\_\_\_\_

Specific observation of the expert committee. \_\_\_\_\_

8. Examination results of the students of last four years  
(excellent/very good/good/satisfactory/poor)

9. Information about computer lab and softwares available in the Institution Computer facilities

S.No.	Particulars	Requirement as per AICTE Norms	Available	Shortfall, if any
1.	Number of Computer Terminals (Terminal-students ratio)			
2.	Hardware Specification			
3.	Number of terminal on LAN/WAN			
4.	Relevant legal Software's			
5.	Peripheral(s)			

Whether the Computer facilities for the proposed Institution are being Shared with other institution, if so give details.

\*Availabilities of vouchers and payment receipt indicating proof of purchase

Yes No

\*Whether entries have been made in the stock register (The Expert to kindly affix their Signature on the last page of Stock Register)

Yes No

\* Whether the computer centre is fully furnished.

Yes No

\* Brand of computers & printers

(All computers should be in operational state/switched on at the time of inspection).

Shortfall/deficiency as per AICTE/RGPV norms \_\_\_\_\_

Specific observation of the expert committee. \_\_\_\_\_

#### 10. Additional Facilities:

\* Principal's Quarter's

Yes No

\* Quarter's for faculty

Yes No

\* Guesthouse

Yes No

*	Parking facility	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Digital library	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Medical facilities(part time medical officer)	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Insurance facilities(Medi-claim+Accident Insurance)	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Provision for Bank/Extension counter	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Provision for Post Office	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Provision for Telephone booth	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Gymnasium/Indoor/Outdoor stadium	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Sport facilities	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Whether rainwater-harvesint facility has been provided in the institution.	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Canteen facility	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			
*	Girl's common room	<table><tr><td>Yes</td><td>No</td></tr></table>	Yes	No
Yes	No			

**11. A brief note about policies and plans of the management for faculty and staff development**

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**12. A brief report about the Innovation and Technological Changes introduced in the institution in last 3 years.**

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**13. Number of students selected through campus interviews in last 3 years.**

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14. Status of Compliance of Specific Conditions of Last Approval/Extension of Approval by AICTE/RGPV/DTE

S.No.	Specific Condition	Compliance Status

15. Specification observations of the Expert Committee on the following parameters.

Parameters	Comments
Adequacy & Suitability of Built-up space	
Furniture/Teaching Aids for the professional course	
Computer facilities	
Laboratories & workshop	
Faculty	
Library	
Additional faculties	

16. List of members of the society/trust who interacted with The visiting expert committee.

S.No.	Name of Members	Designation in the Society/Trust/Institution	Signature
1			
2			
3			
4			
5			

Major Strengths & Weaknesses of the institution observed by the Expert Committee

- Strengths  
1.  
2.  
3.

Weaknesses

1.  
2.  
3.

17. Any other observation/comments of the Expert Committee on suitability of the Institution

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**RECOMMENDATIONS OF THE EXPERT COMMITTEE.**

Recommended

S.No.	Course(s)	Intake	Period of Affiliation
1			
2			
3			
4			
5			

Not Recommended


Name and Signature of the Expert Committee Members

Signature :  
Name :  
Designation & Address  
(Chairman)

Signature  
Name  
Designation & Address  
(Member)

Signature :  
Name :  
Designation & Address  
(Member)

Signature  
Name  
Designation & Address  
(Member)

## **Undertaking (I)**

**To be Prepared on 100/- Rs. Stamp Notarized and Submitted at the time of Insepction.**

I \_\_\_\_\_ Chairman/Secretary of \_\_\_\_\_, (College) hereby undertake the followings details related with the Institutions \_\_\_\_\_

1. The Land \_\_\_\_\_ will be used as per the Master Plan for the purpose mentioned in the plan.
2. The Building with built up area of \_\_\_\_\_ constructed for Diploma/Post Diploma \_\_\_\_\_ course only and will be exclusively used for this purpose alone.
3. The Institution has recruited qualified staff as per the norms for the proper functioning and maintenance of the Institution for Diploma/Post Diploma \_\_\_\_\_ in \_\_\_\_\_ and it will not be shared with other institution.
4. The Institute has purchased \_\_\_\_\_ books with \_\_\_\_\_ titles and \_\_\_\_\_ Journals and other such requirements for library for the Diploma/Post Diploma \_\_\_\_\_ course and will be used only by the students and faculty members of the \_\_\_\_\_ College name.
5. \_\_\_\_\_ number of computers have also been made available in the computer room and these computers will be used only by the students and faculty members of \_\_\_\_\_ College name.
6. All laboratories/workshop are provided and fully established for various courses/discipline by providing space, furniture, equipments/Instruments experimental setups and Licensed software as per AICTE norms.

contd....2/---

7. The following faculty members and Principal have been exclusively recruited the proposed \_\_\_\_\_ only and no impersonisation of faculty has taken place.

S.No	Name of faculty	Designation Qualification	Department	Date of Appointment

8. I undertake that if any one or all of the undertakings, as mentioned above are not fulfilled, complied or found to be false, it will disentitle the institution from grant of affiliation by RGPV Bhopal(MP) for the conduct of the above course(s) for the academic year 2013-14.

Director Principal/Secretary



## राजीव गांधी प्रौद्योगिकी विश्वविद्यालय,

कार्यालय परिसर, ब्लॉक नं.ए-4, गौतम नगर,

भोपाल — 462 023.

दूरभाष नं. 0755-2583627 / 2583673 फैक्स नं.2583656

— :: र सी द :: —

मैं ————— पदनाम —————  
— — — — — के द्वारा संस्था का नाम — — — — —  
का दिनांक — — — — — को निरीक्षण किया गया । जिसका मानदेय रुपये  
— — — — — का भुगतान प्राप्त किया ।

प्राप्तकता के हस्ताक्षर  
नाम पदनाम



## राजीव गांधी प्रौद्योगिकी विश्वविद्यालय,

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— — — — — का भुगतान प्राप्त किया ।

प्राप्तकता के हस्ताक्षर  
नाम पदनाम

Name of the college

Details of the Teaching Faculty in all programmes run by college in both shifts

	Name of the Course	Specialization/Branch	Intake
PG			
Programme	Name of the Course	Specialization/Branch	Intake
UG			
Programme	Name of the Course	Specialization/Branch	Intake
DIPLOMA I SHIFT			
Programme	Name of the Course	Specialization/Branch	Intake
DIPLOMA II SHIFT			
Programme	Name of the Course	Specialization/Branch	Intake
OTHER COURSES IF ANY			

Seal

Name and signature of the Principal

Name of the college

Details of the Teaching Faculty in all programmes run by college in both shifts

Programme	Name of the Course	Name of the Teaching Faculty	Qualification
PG			
Programme	Name of the Course	Name of the Teaching Faculty	Qualification
UG			
Programme	Name of the Course	Name of the Teaching Faculty	Qualification
DIPLOMA I SHIFT			
Programme	Name of the Course	Name of the Teaching Faculty	Qualification
DIPLOMA II SHIFT			
Programme	Name of the Course	Name of the Teaching Faculty	Qualification
OTHER COURSES IF ANY			

Seal

Name and signature of the Principal

## Appendix 01

Name & address of the Institution:

Information Regarding Teaching Faculty of this Institution			
No.	Name of	Name of	Designation
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[illegible]

Signature of Principal  
with date  
and seal of the institute

## Appendix 02

Name and Address of the Institution: \_\_\_\_\_

Information Regarding Supporting Staff( Technical) of this Institution

Name of the laboratory/Computer Centre etc to which attached	Name	Designation	Qualification	Regular Contract	Date of joining	Salary Given		
						Basic	DA	Total

Signature of Principal  
with date  
and seal of the institute

## Appendix 03

Information Regarding Laboratories

Name of laboratories & departments to which attached	Equipments/ Machines available in Laboratories

Signature of Principal  
with date  
and seal of the institute