

# GUJARAT TECHNOLOGICAL UNIVERSITY

Local Inspection Committee Report for the Academic Year : 20\_\_ - 20\_\_

( Ref. order of GTU No : \_\_\_\_\_ )

## TITLE PAGE

( 1 ) Purpose Of Visit : **Approval of Affiliation of New Institute / Extension of Affiliation / Additional course in existing institute / Variation in existing intake for the Year : 20\_\_ - 20\_\_**

( 2 ) Date of Visit :

( 3 ) Type of Institute : (a) Govt. (b) GIA (c) SFI

( 4 ) Course Applied for :  
(a) Degree Engineering / Diploma Engineering  
(b) Degree Pharmacy / Diploma Pharmacy  
(c) MBA / MCA / M.Pharm / M.E.

( 3 ) Details of Institute / Trust :

Sr. No.	Particular	Institute	Trust
1	Name		
2	Address		
3	Phone No. Fax No. Web side. Email		
4	LOA / Registration no		
5	Name of Principal / Trustee		
6	Personnel Contact no./mobile no.		
7	Other ( if any )		

( 4 ) Academic Programmes for which affiliation is sought.

Sr. No.	Name of Course	Intake (approved by AICTE)	Entry Level	Duration
	<b>Total</b>			

### **CHECK LIST**

( As per AICTE norms for establishment of new technical institutions with max. permissible annual intake in Engineering /Technology : 240, Pharmacy : 60, PGDM/MBA :60, MCA : 60, Hotel Mgt.& Catering Tech. : 60.)

#### **[ A ] LAND AND BUILDING**

<b>Sr. No</b>	<b>Particulars</b>	<b>As per AICTE</b>	<b>Actual at Institute</b>	<b>Deficiency ( if any )</b>
1	Original land documents	In the name of Trust		
2	Available land for the particular institute (in acre) Engineering /Technology Pharmacy PGDM/MBA MCA Hotel Mgt.& Catering Tech.	Mega/ Metro/Others 3.00 / 5.00 / 10.0 0.75 / 1.25 / 2.0 0.5 / 0.5 / 1.0 0.5 / 0.75 / 1.0 1.0 / 1.5 / 2.5		
3	Land use certificate and NA permission order	By competent Authority		
4	Detailed Building plans	Prepared by architect and approved by concerned statutory authority		
5	<b>Built up area ( in Sq.m.)</b> Engineering /Technology Pharmacy PGDM/MBA MCA Hotel Mgt.& Catering Tech.	Instru. /Adm. /Total 2770 / 535 /4300 652 / 200 /982 502 / 155 /772 552 / 155 /822 852 / 200 /1182		

#### **[ B ] ACADEMIC REQUIREMENT**

<b>Sr. No</b>	<b>Particulars</b>	<b>As per AICTE</b>	<b>Actual at Institute</b>	<b>Deficiency ( if any )</b>
1	<b>Instructional Area &amp; Nos.</b> <ul style="list-style-type: none"><li>• Class Room (66 sq.m.)</li><li>• Tutorial Room(36 sq.m.)</li><li>• Drawing Hall(175 sq.m.)</li><li>• Computer Centre(150sq.m)</li><li>• Library (400 / 150 sq.m.)</li><li>• Laboratories</li><li>• Work shop</li><li>• Conference / Seminar Rooms</li><li>• Multi Media Room</li></ul>	Intake x 0.75 / 60 Intake x 0.50 / 60 Minimum 01 Minimum 01 Minimum 01		

2	<b>Faculty position - Teaching</b> <ul style="list-style-type: none"> <li>• Principal</li> <li>• Professor</li> <li>• Assi.Prof. / HOD</li> <li>• Lecturer</li> <li>• Lab. Assi.</li> <li>• Instructor</li> </ul> <b>Faculty Position –Non Tech</b> <ul style="list-style-type: none"> <li>• Office Superint.</li> <li>• Head Clerk</li> <li>• Librarian</li> <li>• Accountant</li> <li>• Sr.Clerk</li> <li>• Jr. Clerk</li> <li>• Peon / Hamal</li> </ul>	01 {2 x intake / 135}-1 2 x intake / 135 6 x intake / 135 01 per Lab.  Minimum 01 Minimum 01 Minimum 01 Minimum 01 02 04 05		
3	Teacher student ratio	1:15		
4	Faculty Cadre ratio	1:2:6		
5	<b>Computers and Software</b> No.of Computer terminals  Licensed software  Peripherals	<b>1:4 (terminal: student)</b> <b>1:2 ( -do- for MBA/MCA)</b>  <b>System software : 02</b> <b>Application software:04</b>  <b>1:10 (printer : terminals)</b>		

[ C ] ADMISSION STATUS

Sr no	Year	Intake Approved by AICTE	Nos of Students Admitted	Nos of Students Enrolled	Nos of Students Left / Tran.	Remarks
1	2008-09					
2	2007-08					
3	2006-07					
4	2005-06					

[ D ] RESULT ANALYSIS

Sr no	Year	Sem.	Nos of Students Enrolled	Nos of Students Passed	Nos of Students Passed with CPI > 8	Nos of Students Passed with CPI > 7	Nos of Students Passed with CPI > 6	Nos of Students Passed with CPI > 5
1	2008-09	1						
		2						

[ E ] **CO-CURRICULAR ACTIVITIES ( Give details of following on separate sheet)**

- (a) **Details of Faculty Deputed for higher studies**
- (b) **Faculty participation in Seminars / Conferences (National / International)**
- (c) **Details of Paper presented by Faculty in the last academic year**

[ F ] **OTHER ACHIEVEMENTS ( Give details of following on separate sheet)**

- (a) **By Institute**
- (b) **By Faculty**
- (c) **By Students**

[ G ] **Institute has to furnish the Faculty details in given tabulated Performa.**

Sr. no	Name of Faculty	Department	Designation	Educational Qualification	Date of Joining

[ H ] **LIBRARY / BOOKS AND JOURNALS ( Minimum as per AICTE norms )**

Sr. No	Particulars	As per AICTE	Actual at Institute	Deficiency ( if any )
1	Books per course ( Tech.) 1. No of Titles 2. No of Volumes 3. No of Volumes ( general	Engg / Pharm/others 250 / 150 / 150 1000 / 1500 / 1000 1000 / 250 / 100		
2	Journals per course 1. National 2. International	Min. 05 Min. 02		
3	No.of LR's and e-books	Preferred		
4	1. Availability of library software 2. Accession Register 3. Digital library	Encouraged		
5	LAN facility.....	Atleast 50% of the total computers should be in LAN		
6	Reading hall with capacity			

[ I ] **OTHER ESSENTIAL AMENITIES ( As per AICTE norms )**

Sr. No	Particulars	As per AICTE	Actual at Institute	Deficiency ( if any )
1	Student Canteen	100 Sq.m.		

2	Girls common Room	100 Sq.m.		
3	Boys common Room	100 Sq.m.		
4	Language Lab.	Min. for 30 students		
5	Parking Facility	200 Sq.m.		
6	Play Ground	2000 Sq.m.		
7	Auditorium	Min Cap. Of 250		
8	Medical Centre / First aid			
9	Hostel for Boys			
10	Hostel for Girls			

**[ J ] MANDATORY REQUIREMENT FOR GTU (Clearly mentioned the availability)**

- ( 1 ) Internet Line (minimum 256 kbps (**shared/dedicated**)) Yes / No  
( 2 ) High end copier Machine with minimum 75 pages per minute capability. Yes / No  
( 3 ) Generator/Inverter/UPS with six hours battery back-up to support computer systems and copier machine. Yes / No

**[ K ] DETAILS OF FEES COLLECTED AT INSTITUTE**

( Attached separate sheet along with the Fee Regulatory Committee approval )

**[ L ] OBSERVATIONS OF INSPECTION COMMITTEE**

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**[ M ] RECOMMENDATIONS FOR AFFILIATION**

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**[ N ] REASON FOR REJECTION ( If any )**

Date :

Place :