Netaji Subhash Chandra Bose Govt. Girls PG College,

Aliganj Lucknow

Details for IQAC/NAAC YEAR (2023-24)

NAME	:
DEPART	MENT

1. COMMITTEE ASSIGNED AND POSITION HELD

SN	COMMITTEE	HEAD/MEMBER
1	Chief Proctor	
2	IQAC	
3	NAAC	
4	EXAMINATION	
5	ALUMNI (STUDENT)	

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

2. RESEARCH PUBLICATION IN THE JOURNALS

SN	SESSION	NO OF PAPERS	JOURNAL NAME	TOPIC and IMPACT FACTOR
1				
2				
3				
4				
5				
6				
7				
8				

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.

• Please attach photographs related to activities, if available.

3. BOOKS AND CHAPTERS IN EDITED VOLUMES/BOOKS PUBLISHED AND PAPERS PUBLISHED IN NATIONAL/ INTERNATIONAL CONFERENCE PROCEEDINGS

SN	PUBLICATION TYPE	SESSION	NUMBER PUBLISHED	PUBLISHER
1	воок			
2	CHAPTER IN BOOK			
3	NATIONAL CONFERENCE PROCEEDING			
4	INTERNATIONAL CONFERENCE			
	PROCEEDING			

BOOKS P

• Fill the information as per records and work accomplished by you.

S.N.	Title and Total No. Of Pages in the Book	Year of Publication and edition	Publisher and ISSN/ISBN	Publisher Level (International, National, Others)

- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

4. PARTICIPATION IN SEMINAR/ CONFERENCE/ WORKSHOP AND SYMPOSIA

SN	TYPE OF CONFERENCE/SYMPOSIA	SEMINAR/ WORKSHOP/	SESSION	NUMBER OF PAPER PRESENTED	ATTENDED AS RESOURCE PERSON (GIVE NUMBER)
1	INTERNATIONAL				
2	NATIONAL				
3	LOCAL				

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

5. PARTICIPATION IN ANY PROFESSIONAL DEVELOPMENT PROGRAMMES

SN	NAME OF PROGRAMME	SESSION	HELD AT	DATES AND DURATION
1	ORIENTATION			
2	REFRESHER			
3	FACULTY DEVELOPMENT PROGRAMME			
4	SHORT TERM COURSE			

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

6. DETAILS OF VALUE EDUCATION PROGRAMME (VALUE EDUCATION COMMITTEE OR DEPARTMENT LEVEL PROGRAMME)

SR.NO.	CLASS	ACTIVITY/PROGRAMME/LECTURE/	DATE/DURATION	NO OF
				PARTICIPANTS
1.				

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

7. DETAILS OF CULTURAL ACTIVITIES (CULTURAL COMMITTEE AND DEPARTMENT LEVEL (LIKE FRESHER WELCOME OR OTHER)

SR.NO.	DATE (FROM-	NAME OF	HELD	ORGANIZER	NO OF
	TO)	ACTIVITY	AT		PARTICIPANTS
1.					

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

8. DETAILS OF PARISHADIYA/COUNCIL/ACTIVITIES

SR.NO.	DATE (FROM-	NAME OF	HELD	ORGANIZER	NO OF
	TO)	ACTIVITY	AT		PARTICIPANTS

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

9. DETAILS OF SPORTS ACTIVITIES (SPORTS COMMITTEE)

SR.N O.	DATE (FRO M-TO)	NAME OF SPORT/ACTIVI TY	LOCAL/NATIONA L/ INTERNATIONAL	AWARD/MED AL	STUDENTS PARTICIPATE D	NAME OF AWARDE E STUDENT S
1.						

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

10. DETAILS OF CULTURAL ACTIVITIES (CULTURAL COMMITTEE)

SR.N	DATE	NAME OF	LOCAL/NATIONA	AWARD/MED	STUDENTS	NAME
Ο.	(FRO	SPORT/ACTIVI	L/	AL	PARTICIPATE	OF
	M-TO)	TY	INTERNATIONAL		D	AWARDE
						E

			STUDENT
			S
1.			

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

11. DETAILS OF ACTIVITIES UNDER NSS DEPARTMENT

 Number of extension and outreach programmes conducted. Please mention if any collaboration with industry, community, and Non-Government Organizations through NSS department level

SR.NO.	TITLE OF ACTIVITY	DATE AND DURATION	COLLABORATING AGENCY	ISSUE ADDRESSED	NO OF PARTICIPANTS
1.					
					_

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

12. DETAILS OF ACTIVITIES UNDER NCC DEPARTMENT

 Number of extension and outreach programmes conducted. Please mention if any collaboration with industry, community and Non-Government Organizations through NCC department level

SR.NO.	TITLE OF	DATE	COLLABORATING	ISSUE	NO OF
	ACTIVITY	AND DURATION	AGENCY	ADDRESSED	PARTICIPANTS
1.					

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

13. DETAILS OF ACTIVITIES UNDER ROVERS RANGERS DEPARTMENT

 Number of extension and outreach programmes conducted. Please mention if any collaboration with industry, community and Non-Government Organizations through NSS/ NCC/ Rovers Ranger or department level

SR.NO.	TITLE OF	DATE	COLLABORATING	ISSUE	NO OF
	ACTIVITY	AND DURATION	AGENCY	ADDRESSED	PARTICIPANTS
1.					

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

14. AWARDS AND RECOGNITION RECEIVED FOR EXTENSION ACTIVITIES FROM GOVERNMENT AND OTHER RECOGNIZED BODIES DURING THE YEAR

SR.NO.	NAME OF ACTIVITY	AWARD/ RECOGNITION	AWARDING BODIES	NO. OF STUDENTS BENEFITED
1.				

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

15. STUDENTS PARTICIPATING IN EXTENSION ACTIVITIES WITH GOVERNMENT ORGANIZATIONS, NON-GOVERNMENT ORGANIZATIONS AND PROGRAMMES SUCH AS SWACHH BHARAT, AIDS AWARENESS, GENDER ISSUE ETC. DURING THE YEAR (NSS, NCC AND ROVERS RANGERS)

SR.NO.	NAME OF SCHEME	ORGANIZING BODY/ AGENCY	NAME OF ACTIVITY	NO. OF FACULTIES COORDINATED SUCH ACTIVITIES	NO OF PARTICIPANTS

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Placement Cell

16. DETAILS OF CAMPUS PLACEMENT DURING THE YEAR

On Campus

Sr.No.	Name of Organizations visited	No. of Students Participated	No. of Students Placed
1.			

Off Campus

Sr.No.	Name of Organizations visited	No. of Students Participated	No. of Students Placed
1.			

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Alumni record

17. Alumni COMMITTEE RECORD

SN	Session	No. of students enrolled/ participated	No. of meetings held

18. PARENT TEACHERS COMMITTEE RECORD

SN	Session	No of parents participated	No. of meetings held

19. ENVIRONMENT AND SWACHHATA COMMITTEE REPORT

SN	Date/ duration	Activity name	No.of students participated	Held at and guest involved

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Women Cell

20. GENDER EQUITY (NO OF GENDER EQUITY PROMOTION PROGRAMMES ORGANIZED BY THE INSTITUTION DURING THE YEAR)

SR.NO.	TITLE OF THE	DATE (FROM-	NO OF PARTICIPANTS (MALE/
	PROGRAMME	TO)	FEMALE)
1.			

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Schlolarship details

21. SCHOLARSHIP COMMITTEE

SN	SESSION	FINANCIAL SUPPORT FROM	NO.OF STUDENTS BENEFITTED	AMOUNT IN RUPEES

Department details

22. Details of the skill development programme in the department

Programme	Date/ Duration	Class	Agency/ Guest involved	No of participants
Students mentorship				
personal counseling				
Carrier counseling				
language lab				
Environment related prog				
Field visits				

Extension lectures		
Value added programme		
Extension activities for social		
cause		
Remedial classes		
Soft skill development		
programme		

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available

Details of events organised

23. Details of the programmes

Events	Dates/duration	Organized As	Topic	Key note speaker	No. of participants
Seminar/webinar					
FDP					
Short term course					
Research methodology					
course					
Student seminar					
Training prog					
Workshop					
Any other					

- Fill the information as per records accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Examination and Result Details

24. EXAMINATION DETAILS

Sr.No.	Class	Year/semester	Paper name	Last date of Last exam	Date of declaration of result
			Hairic	CAGIII	resure

25. PASS PERCENTAGE OF STUDENTS

Sr.No.	Class	Paper	No of students appeared in	No of students passed	Pass
		name	final semester/ year exam	in final semester/ year	percentage

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

Students progression details

26	ъ. г	epartment:

Session	Student enrolled in PG course passed from the college (no of students)	Students enrolled in other institute (no)	Name of institute where admitted

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

27. STUDENTS QUALIFIED IN NET/GATE/SLET/OR OTHER

ITEM	DATE/ YEAR	No. of students selected	Roll no of exam	Place of appointment
NET				
SLET				
SET				
GATE				

CAT		
CIVIL		
SERVICES		
ANY OTHER		

- Fill the information as per records and work accomplished by you.
- Fill N.A. if not applicable.
- Please attach photographs related to activities, if available.

28. DETAILS OF EBSB PROGRAMME

SR.NO.	CLASS	ACTIVITY/PROGRAMME/LECTURE/	DATE/DURATION	NO OF PARTICIPANTS
1.				

29. DETAILS OF MISSION SHAKTI PROGRAMME 20-21

SR.NO.	CLASS	ACTIVITY/PROGRAMME/LECTURE/	DATE/DURATION	NO OF
				PARTICIPANTS
1.				

Best practices of the department (Teaching, learning or others)

Write here:		
	 	 -

Participation in bos /academic activities

Date department agendas covered

Ict tools

Date class topic covered no of students present

Detais of ICC

Signature