

Kakatiya University: :Warangal

**APPLICATION FOR EXTENSION (RENEWAL) OF AFFILIATION
FOR THE ACADEMIC YEAR 2015-2016**

| | | | |
|-----|---|---|--|
| 1. | Name of the College with University Code | : | |
| 2. | Year of Establishment | : | |
| 3. | Postal Address | : | |
| 4. | Telephone Number with STD Code | : | |
| 5. | E-mail | : | |
| 6. | Website | : | |
| 7. | Location (please tick) | : | Urban/Rural/Tribal |
| 8. | Name of the sponsoring society | : | |
| 9. | Name of the Secretary-cum-Correspondent | : | |
| 10. | Postal Address | : | |
| 11. | Contact No. of the Secretary | : | |
| 12. | Courses and intake (Please enclose the proceedings of the NCTE issued from time to time) | : | |
| 13. | Enrolment of the students for the past four years | : | 2014-15 2013-14 2012-13 2011-12 |
| 14. | Name of the Principal and Qualification (please enclose bio-data and Photostat copies of the certificates) | : | |

15. Details of Faculty members (please use a separate sheet):

| Sl. No. | Name | Qualification with subject | Class obtained with % of marks | Permanent/Temporary/Part-time | Total Years of Service | Service at the present college | Whether appointed through selection committee*(Yes/No) |
|---------|------|----------------------------|--------------------------------|-------------------------------|------------------------|--------------------------------|--|
| | | | | | | | |

(Please enclose bio-data and Photostat copies of the certificates of each faculty member)

* Approval orders of the University are to be enclosed

16. Details of Accommodation (enclose the building plan duly indicating the details of purpose for which the rooms are used):

| Sl. No. | Room No. | Dimensions in feet and Carpet area in Sq. Ft. | Purpose for which it is used |
|---------|----------|---|------------------------------|
| | | | |

Contd..."2..

17. Laboratory equipment (Major of value more than Rs. 5,000-00:

| Sl. No. | Item | Make | Number |
|---------|------|------|--------|
| | | | |

(please enclose separate list)

18. Library: Please specify whether a qualified Librarian is available or not Yes/No
If yes, Name of the Librarian with qualification:

| Books | | No. of Journals | | No. of Periodicals |
|---------------|----------------|-----------------|---------------|--------------------|
| No. of Titles | No. of Volumes | National | International | |
| | | | | |

19. Compliance on the previous affiliation orders (please enclose the previous affiliation orders and the compliance report on the conditions stipulated therein):

20. Information regarding M. Ed. Course – Enclose copy of the NCTE/ State Government Order sanctioning the M.Ed. course: (please provide the information about faculty members, who are dealing with M.Ed.):

| Sl. No. | Name | Qualification with subject | Class obtained with % of marks | Permanent/ Temporary/ Part-time | Total Years of Service | Service at the present college | Whether appointed through selection committee*(Yes/No) |
|---------|------|----------------------------|--------------------------------|---------------------------------|------------------------|--------------------------------|--|
| | | | | | | | |

21. Declaration:

I, _____, Secretary/Correspondent of _____ College do hereby declare that the particulars furnished above are true and correct to the best of my knowledge and belief.

Date:

SECRETARY/CORRESPONDENT

22. Certification by the University nominee on the Governing Body:

I hereby forward the application of the college with certification that I have visited the college and the information furnished above is true and correct to the best of my knowledge and belief.

Date:

SIGNATURE OF THE UNIVERSITY
NOMINEE ON THE GOVERNING BODY
OF THE COLLEGE