University of Pune

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Planning & Development Section Ganeshkhind, Pune - 411 007.

Ref. No: - PU / DEV -803

Date:- 14th July 2012

TIME BOUND IMPORTANT INFORMATION

To,

The Heads, University Teaching Departments.

The Principals, Affiliated Colleges.

The Directors, Recognized Institutes.

Subject:- Annual Report 2011-2012 for the Period 1st July, 2011 to 30th June, 2012.

Sir/Madam,

As you are aware, Annual Report of the University containing information regarding academic activities including research and publications, developments, sports, culture events etc. in respect of University Departments, Affiliated Colleges and Recognized Institutes is published every year. The Annual Report is publishing in accordance with provisions of Section 104 of the Maharashtra Universities Act, 1994.

I am therefore, to request you to send the information for University Annual Report for the Period 1st July, 2011 to 30th June, 2012 in the Analytical and Statistical Performa which is available on a university website (<u>www.unipune.ac.in</u>) under Planning & Development Circulars, in duplicate, typed on your letterhead, signed and sealed on or before 20th August, 2012. You are also requested to send the same information on our E-mail <u>pldvp@unipune.ac.in</u> so that it will save the time.

Secondly, kindly send the photographs of the important events at national or international level to be incorporated in the Annual Report. Please give detailed information of the event and names of dignitaries on the backside of the photographs. Some selected photographs will be published in the Annual Report.

It may be kindly noted that, in case of Departments, College & Institute failing to submit the information, it would be difficult for office to make appropriate decisions in relation to various facilities given by University, i.e. recommendations on various proposals for financial assistance to be forwarded to Higher authorities like UGC/State Govt. etc. and proposals under Quality Improvement Programme of the University.

You are requested to give information in the stipulated time & co-operate.

Thanking You.

soterphole

Deputy Registrar Planning & Development

D/Annual Report 2011-12/Information for Annual Report/Dr.RKN

Analytical Information-I

Students Sports Activities (2011-2012)

Name of the Department/College/Institute :-

Sr.No.	Names of the Students	Event in which participated	State/National/International Level	Prizes/Medals Won
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Note :- Please send the information in "typed" form and see that is easily readable.

Analytical Information-II

Students Academic Activities (2011-2012)

Name of the Department/College/Institute :-

Sr.No.	Names of the Students	Event in which participated	State/National/International Level	Prizes/Medals Won

Note :- Please send the information in "typed" form and see that is easily readable.

Analytical Information-III

Students Cultural Activities (2011-2012)

Name of the Department/College/Institute :-

Sr.No.	Names of the Students	Event in which participated	State/National/International Level	Prizes/Medals Won

Note :- Please send the information in "typed" form and see that is easily readable.

Analytical Information-IV

National Service Scheme (N.S.S.) (2011-2012)

Name of the Department/College/Institute:-

1. No.of students enrolled :-

2. No.of N.S.S. Camps held:-

3. Names of Students participated in R.D.Parade:-

4. Special Work done by N.S.S. Students:-

5. Any Other Information:-

Note :- Please send the information in "typed" form and see that is easily readable.

Analytical Information-V

N.C.C. (2011-2012)

Name of the Department/College/Institute:-

1. No.of students enrolled :-

2. No.of N.C.C. Camps held:-

3. Name of Students participated R.D.Parade:-

4. Special Work done by N.C.C. Students:-

5. Any Other Information:-

Note :- Please send the information in "typed" form and see that is easily readable.

PROFORMA-A ANNEXE- A Statistical Information

Name of the Department/ College/Institute	Name of the Head/Principal/Director and Qualification	Tel No. (O/R) with STD Code, Fax No., e- mail address and website address	Whether College/Institute included under section 2(f) & 12(b) UGC Act. 1956	Permanent Affiliate
			Yes /No : If Yes	
			Letter No Date :	
	*			
		5		

Note: - Please send the information in "Typed" form and see that is easily readable.

Seal

Signature of the Head/Principal/Director

PROFORMA FOR UNIVERSITY Department/ College/Institute ANNEXE- D

Name of the Department/ College/Institute:-

Reference Books/Monographs published by Teachers (1st July 2011 to 30th June 2012) (Text books should not be mentioned.)

(Give names of Teachers in the alphabetical sequence)

Sr. No	Name of the Teacher(s) Author	Title of the Books/Monographs	Name and Place of publishers	Date of Publication	ISBN/ISSN. NO.	
				-		
		-				
			3			

Note:- Please send the information in "typed" from and see that is easily readable.

Signature of the Head/Principal/Director

Seal

PROFORMA FOR Department/ College/Institute ANNEXE- E Conferences, Symposia, Seminars, Workshops etc. organized by the Department/ College/Institute (1st July 2011 to 30th June 2012)

Sr. No	Name of the Department/+ College/Institute	No. of University/ Local Conferences, Seminars, Symposia and Workshops	No. of State Conferences, Seminars, Symposia and Workshops	No. of National Conferences, Seminars, Symposia and Workshops	No. of International Conferences, Seminars, Symposia and Workshops
			2		

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Signature of the Head/Principal/Director

Seal

PROFORMA FOR Department/ College/Institute

ANNEXE- F

Name of the Department/ College/Institute:-

Research Publications in National and International Journals/Conference Proceedings (1st July 2011 to 30th June 2012) (Give Names of Teachers in the alphabetical sequence)

Sr. No	Name of the Teacher(s) Author	Title of the Paper	Name of the Journal/Proceeding/Edited Books	Volume & Pages	Year of Publication	ISBN/ISSN. NO.	Citation No.
					-		

Note:- Please send the information in "typed" from and see that is easily readable.

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Signature of the Head/Principal/Director

PROFORMA FOR Department/ College/Institute

ANNEXE- G

Name of the University the Department/ College/Institute:-

Research Projects/Schemes undertaken by Teachers

(1st July 2011 to 30th June2012) (Give Names of Teachers in alphabetical sequence)

Sr. No	Name of the Investigator(s)	Title of the Research Project/Scheme	Name of the Funding Agency	Duration of the project/scheme	Amount Sanctioned (Rs.)	Major/ Minor
				,	-	
_						
	-			2		

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Signature of the Head/Principal/Director

PROFORMA FOR Department/ College/Institute ANNEXE- H

Name of the University Department/ College/Institute:-

Teachers Participated in National and International Conferences, Seminars, Symposia, Workshops etc. (1st July 2011 to 30th June2012)

	Seminars, etc.
	5. U)

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Signature of the Head/Principal/Director

PROFORMA FOR College/Institute ANNEXE- J

Name of the College/Institute :-

(1st July 2011 to 30th June2012)

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	U	G	P	G	M.P	hil.	Ph	.D.	D	ip.	T	otal	OP	SC	ST	DT-	NT-	NT-	NT-	OBC	Total	Teaching	Students	Residents	Books
	M	F	M	F	M	F	M	F	M	F	M	F				A	B	C	D			Staff			
				2					7															-	
											14													1. -	

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Signature of the Principal/Director

PROFORMA FOR College/Institute ANNEXE- K

Name of the University Department/ College/Institute :-

Faculty wise Enrolment of Students 2011-2012

Granted/Non-Granted

Sr. No.	Faculty	Enr	olment - Gran	ted	Enrolment - Non Granted				
		Male	Female	Total	Male	Female	Total		
1	Arts and Fine Arts								
2	Mental, Moral and Social Sciences								
3	Science								
4	Law								
5	Engineering	_			-				
6	Commerce								
7	Education								
8	Pharmaceutical Sciences								
9	Physical Education								
10	Management								
	Total								

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Signature of the Head/Principal/Director

PROFORMA FOR University Department/College/Institute

ANNEXE-L(1)

Name of the University Department/ College/Institute :-

Faculty wise Enrolment of Students 2011-12

Granted/Non-Granted Statistical Information about Under-Graduate & Post-Graduate Students 2011-12

Course								Er		_		rant	ed/N	lon (Grante	ed					No. of	No. of students	Hostel
	S.	C.	S.	Τ.	DT	`-A	NT	`-В	NT	`-C	NT	`-D	0	BC	S	BC	OI	ben		otal Iment	Foreign Students	having Sch. other than Reserve Category	Residents
	M	F	M	F	Μ	F	M	F	Μ	F	M	F	M	F	M	F	M	F	M	F			
	-	-		-	-			-		-		-	-	-									
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Signature of the Head/Principal/Director

PROFORMA FOR University Department/College/Institute ANNEXE- L (2)

Name of the College/Institute :-

Granted/Non Granted Statistical Information about Teaching Staff 2011-12

Designation	Open		• S.C.		S.T.		DT-A		NT-B		NT-C		NT-D	
	Granted	Non- Granted												

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Signature of the Head/Principal/Director

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