

Self Appraisal Report for the Academic Year 20 - 20

(Please furnish the information for the period July to June only)

1. Department : _____
2. Name of the faculty : _____
3. Designation : _____
4. Date of joining : _____
5. Scale of pay : _____
6. Total emoluments : _____
7. Address for correspondence : _____

Email : _____

Phone No. : _____

8. Academic Qualifications (in Chronological order starting from Highest Degree):

S. No.	Degree	Institution	Board / University	Specialization	Month & Year of Passing	Class/ Division	% of Marks
1							
2							
3							
4							
5							
6							

9. Experience:

S. No.	Organization	Period		Scale of pay	Total emoluments
		From	To		
1					
2					
3					
4					
5					

10. Subjects Taught (with pass %):

S. No	Subject	% of pass

11. Laboratories handled:

S. No	Lab	% of pass

12. Academic Projects guided:

S. No	UG/PG	Title of the Project	Domain

13. Membership of professional bodies:

S. No	Name of the Professional Body	Membership Type

14. Certified Courses MOOCs/SWAYAM:

S. No.	Name of the Course	Date/Month/Year	Duration	Offered Institute	Grade

15. Mentoring Details:

S. No.	Activity	No. of Students	Remarks
1	Placement		
2	Higher Education		
3	Sports Representation		

16. Short Term Training Programs (STTP/FDP) conducted/attended.

S. No.	Name of the Program	Date/Month/Year	Organisation in which attended/Conducted

17. Research publications:

i) Conferences/Seminars/Symposiums

S.No.	Title of the paper	Name of the program with address	pp, vol., month & year	ISBN No. of proceedings

ii) National & International journals

S. No.	Title of the papers	Name of the Journal	pp, vol., month & year	ISSN No. of Journal	Category of the Journal*

*Journal Category: SCI/ESCI/WoS/Scopus Indexed

18. Outside World Interactions (BoG/BoS/Reviewer/Speaker/Session Chair etc.):

S. No.	Activity	Date/Month/Year	Remarks

19. Projects/Travel grants received:

S. No.	Project Title	Sanctioned Date	Sanctioned Amount	Scheme / Agency

20. Patents / Copyrights:

S. No.	Application No	Title	Status	Date

21. Ph.D. Guideship:

S. No	Name of the Scholar	Year of Registration	University	Remarks

22. Awards / Recognitions / Prizes (if any):

S. No	Description	Year	Agency

23. Students Feedback:

S. No	Class	Semester	%

24. Administrative responsibilities:

25. Any other information:

Note: - Enclose annexures wherever necessary.

Declaration:

I hereby declare that the above furnished information is true and correct to the best of my knowledge and belief.

Signature of the Candidate

Remarks of the HOD:

Signature

Recommendations of the Director

Signature

