

# GUJARAT UNIVERSITY



Affiliation form for New/Renewal, Ad-hoc/Permanent Affiliation programme covered under Arts, Commerce, Science, BBA, BCA, Journalism, Law, Education, Medical, Para Medical etc. Faculties

To,  
The Registrar,  
Gujarat University,  
Navrangpura, Ahmadabad-380009

Sub: Application of Affiliation for: New Institute / Extension of Affiliation & / Additional course in existing institute with Gujarat University for the Academic session 201 - 201 .

**1. Name and Address of the Society/Trust:**

Registration Number of the Trust/Society :	
Name	
Address	
Taluka	
District	
Pin Code	
Phone No. with STD Code	
Fax No. with STD Code	
Email ID	
Web site	

**2. Name and Address of the College/Institute (Existing/Proposed)**

Name	
Address	
Taluka	
District	
Pin Code	
Phone No. with STD Code	
Fax No. with STD Code	

Email ID	
Web site	
Has Gujarat Government issued NOC?	Yes/No/Not Required
Has NCTE/AICTE/MCI/DCI/BCI/CCH recognized?	Yes/No/Not Required.
If applied in NCTE/AICTE/MCI/DCI/BCI/CCH, indicate date of application.	...../...../.....
ID Issued Gujarat University	
ID Issued by NCTE/AICTE/MCI/DCI/BCI/CCH/.....	

### 3. Detailed of Academic Programmes for which Affiliation is Proposed:

Name of Faculty	
Name of Programme	
Under Graduate/ Post Graduate	
Main Subject	
Subsidiary Subject	
Academic Year	
No. of Division	
Time	
Which type of education	

**4. Detailed is required as per Section-33 Gujarat University:**

Sr. No.	Particulars	Details
1	Population of Village / City	
2	Details of Colleges provided same education nearby	
3	Type of Education (Only Women/Co-education)	
4	Expatriation of Intake of Students	
5	Reason for Opening new College	
6	Define Area of College	
7	Medium of Stream / Instruction	

**5. Whether College/Institute is Government/Aided/Un-Aided : Govt./Aided/Un-Aided**

**6. Whether College/Institute is registered as a Minority Colleges? : Yes/ No**

**7. If Yes, type of Minority Linguistic/Religion etc.: : Linguistic/Religion**

**8. Name and Address of the Existing College/Institute run by the Society/Trust**

No.	College/Institute Name	Programme	Name of University with affiliation
1			
2			
3			
4			
5			

9.

**Land Availability (Attach all the records)**

Sr	Parameter	Details
1	Land Category	Metropolitan City/Other Area
2	Area Required as per Land Category (Acres)	1.5 Acres/2.0 Acres/5.0 Acres
3	Total Area Available (Acres)	
4	Land Details	Plot No.: Survey No.: Block No.:
5	Land Address	
6	Whether Land is owned by Trust? (Attach 7/12, 8-A, 6 Certificates)	Yes/No
7	Whether Land is undisputed? If disputed, specify details of dispute with documents	Yes/No
8	Whether Land is NA? If "Yes", mention NA Order and Date. (Attach NA Order)	
9	Whether Land is free of any debt? (Attach certificate)	
10	Whether the said land is demarcated by Fencing/boundary wall for the College/Institution?	Yes/No
11	Whether the said land is contiguous?	Yes/No

10.

**Building Availability (Attach all the records)**

Sr	Particulars for Each Unit	Area ( Length X Breadth) (in Square Meters)
1	Total Class Room.....	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
2	Tutorial Room.....	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter

3	Laboratory	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
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4	Drawing Hall	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
5	Workshop	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
6	Seminar Hall	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
7	Computer Center/	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
8	Library/ Reading	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter
9	Reading	Length: ..... Meter Breadth: ..... Meter Area: ..... Meter

### 11. Total Instructional Area (Carpet Area) in Square Meter

Particulars	For UG/PG	For Existing Intake			
		Numbers		Area	
		Required	Available	Required	Available
Class Rooms					
Tutorial Rooms					
Laboratories					
Drawing Hall					
Workshop					
Seminar Hall					
Computer Center					
Library and Reading Room					
Total					

## 12. Administrative/Amenities Area (Carpet Area) in Square Meter

Particulars	For Existing Intake			
	Numbers		Area	
	Required	Available	Required	Available
Principal/Director Office				
Board Room				
Office all Inclusive				
Department Offices				
Cabins for Head of the Departments				
Faculty Room				
Examinations Control Office				
Placement Office				
Central Stores				
Maintenance				
Security				
House Keeping				
Pantry for Staff				
Toilet (Staff-Male)				
Toilet (Staff-Female)				
Toilet (Boys)				
Toilet (Girls)				
Boys Common Room				
Girls Common Room				
Cafeteria				
Stationery Stores and Reprography				
First Aid cum Sick Room				
Parking				
Play Ground				



13.

Whether has Governing Body been constituted?

Yes/No

14. If Yes, mention last date of meeting: .....

14©. If Yes, mention Constitution and Composition of the Governing Body

Sr	Name and Address	Designation
1	Phone No. with STD Code.: Mobile No.: Email:	Chairman/President
2	Phone No. with STD Code.: Mobile No.: Email:	Managing Trustee/Secretary
3	Phone No. with STD Code.: Mobile No.: Email:	
4	Phone No. with STD Code.: Mobile No.: Email:	
5	Phone No. with STD Code.: Mobile No.: Email:	
6	Phone No. with STD Code.: Mobile No.: Email:	
7	Phone No. with STD Code.: Mobile No.: Email:	
8	Phone No. with STD Code.: Mobile No.: Email:	
9	Phone No. with STD Code.: Mobile No.: Email:	
10	Phone No. with STD Code.:	

	Mobile No.: Email:	
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**15. Name and Designation of Head of the College/Institute (Principal/Director)**

Name	
Designation	
Qualification	
Experience	
Highest Degree	
Specialization	
Total Experience	
Date of Birth	
Phone No. with STD Code	(O): (R): (M):
Fax No. with STD Code	
Email ID	
Whether Approved by Gujarat University?	
If Yes, please mention the Approval Letter Number and Date	

**16. Teaching Staff for the existing programme(s)**

Sr	Name	Category (SC/ST/ SEBC/ OTH/PH)	Designation & Type (Prof/Asso Prof/Asst Prof & Permanent/ Probation/ Ad-hoc/Part- Time/ Visiting)	Qualification	Date of Joining	PayBand, Grade Pay & Total Salary	University Recognition Letter No. & Date
1						Total:	UG: PG: MPhil: PhD:

2						Total:	UG: PG: MPhil: PhD:
3						Total:	UG: PG: MPhil: PhD:
4						Total:	UG: PG: MPhil: PhD:
5						Total:	UG: PG: MPhil: PhD:
6						Total:	UG: PG: MPhil: PhD:
7						Total:	UG: PG: MPhil: PhD:
8						Total:	UG: PG: MPhil: PhD:
9						Total:	UG: PG: MPhil: PhD:
10						Total:	UG: PG: MPhil: PhD:

### 17. Registrar/Office Superintendent

Name of the Registrar/Office Superintendent	
Qualification	
Date of Appointment	
Date of Joining	
Date of Birth	
Phone No. with STD Code	(O):                      (R):                      (M):
E-mail	

**18. Non-Teaching Staff Details**

Sr	Name	Category (SC/ST/ SEBC/ OTH/PH)	Designation (Permanent /Probation/ Ad-hoc)	Qualification	Date of Joining	Pay Band, Grade Pay & Total Salary
1						Total:
2						Total:
3						Total:
4						Total:
5						Total:
6						Total:
7						Total:
8						Total:
9						Total:
10						Total:

**19. Supporting Staff Details (As per List Attached)**

Sr	Name	Category (SC/ST/ SEBC/ OTH/PH)	Designation (Permanent /Probation /Ad-hoc)	Qualification	Date of Joining	Pay Band, Grade Pay & Total Salary
1						Total:
2						Total:
3						Total:
4						Total:
5						Total:
6						Total:
7						Total:
8						Total:
9						Total:
10						Total:

## 20. Librarian

Name	
Qualification	
Experience	
Total Experience	
Date of Appointment	
Date of Joining	
Date of Birth	
Phone No. with STD Code	(O): (R): (M):
Fax No. with STD Code	
Email ID	
Whether Approved by Gujarat University?	
If Yes, please mention the Approval Letter Number and Date	

### 20 (a).Library Staff Details

Sr	Name	Category (SC/ST/ SEBC/ OTH/PH)	Designation (Permanent /Probation /Ad-hoc)	Qualification	Date of Joining	Pay Band, Grade Pay & Total Salary
1						Total:
2						Total:
3						Total:

4						Total:
5						Total:
6						Total:
7						Total:
8						Total:
9						Total:
10						Total:

## 20 (b).Library Facilities

Sr	Particulars	Availability
1	Total Area of the Library	
2	Seating Capacity of the Library	
3	Reprographic Facility	Yes/No
4	Working Hours of the Library	..... am/pm to ..... am/pm
5	Library Networking Facility	Yes/No
6	Usage Data of the Library (in terms of books issued to the faculty and staff etc)	
7	Annual Library Budget (percentage of annual student fee collected)	
8	Number of Computers in Library	



9	Local Area Network If Yes, mention Server Hardware Configuration  If Yes, mention Server Software Configuration	Yes/No Hardware Configuration:  Software Configuration:
10	Internet Facility in Library	Yes/No
11	Reading Room	Yes/No
12		
13		
14		
15		

### 20(c).Details of the Library Books

Sr	Total Number of Titles	Total Number of Volumes	Number of Journals	
			National	International
1				
2				
3				
4				
5				

## 21. Computer Facility

Sr	Program	Course	No. of Computers	Configuration	Peripherals with Configuration (Printers, Scanners, LCD Projector,
1					
2					
3					
4					
5					

## 22. Local Area Network Details:

.....  
 .....  
 .....

## 22 ( a ) .Internet Facility Details: (Please attach Photostat copy of the Bill)

Internet Service Provider	
Type of Connectivity	Leased Line/Broadband/Dongle/.....
Connection Type	Dedicated/Shared
Speed	..... MBPS
WiFi	Yes/No

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**23. Audited Balance Sheet Attached? Yes/No**

**24. Financial Detailed: Deposits/ Bonds/ Cash and any other (Copy attached)**

Sr. No.	Particular	Amount	Name of Bank	Deposits Receipt No. & Date
1.				
2.				
3.				
4.				
5.				
6.				

**25. Other Facilities**

Sr	Parameter	Availability
1	Language Laboratory	
2	All Weather Approach Road	
3	Potable Water Supply	
4	Electrical Generator	
5	Digital Library	
6	Parking Facilities	
7	Medical Facilities	
8	Insurance Facilities	
9	Reprographic Facilities in the College/Institute	
10	Sewage Disposal	
11	Telephone and Fax	
12	General Notice Board and Departmental Notice Boards	
13	Medical and Counseling Facilities	
14	College/Institute Website	
15	First Aid Facility	

16		
17		
18		
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22		
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24		
25		

**I hereby undertake that-**

- 1. The College/Institute has constituted a Governing Body and meetings of the Governing Body were held during the year ....., as well as Woman's Development Cell/Internal Complaint Committee, SC ST Cell etc.**
- 2. The emoluments including allowances that are required to pay to the teachers and other employees of the College/Institution are and shall be in accordance with the grades allowances as per the rules. All the appointments of the teachers and other employees are strictly made in accordance with rules and regulations.**
- 3. All the necessary facilities are provided to the students.**
- 4. All the necessary funds such as Building Fund, Security Fund etc. are deposited in the Scheduled Bank ....., Branch as directed by the University.**
- 5. The College/Institute has complied with all the provisions of The Gujarat University Act, 1949 and the provisions of Statutes, Ordinances, Regulations and Rules made in this behalf by the University from time to time.**
- 6. The College/Institute has complied with all the provisions of University Grants Commission [Affiliation of Colleges by Universities] Regulations, 2009 published in the Gazette of India, 20<sup>th</sup> February, 2010 and UGC, New Delhi letter No.F.1-7/2007 (CPP-I) dated 29<sup>th</sup> April 2010.**
- 7. The College/Institute has complied with all the provisions of University Grants Commission [Affiliation of Colleges by Universities] (1st Amendments) Regulations, 2012 published in the Gazette of India, 26<sup>th</sup> March, 2012 and UGC, New Delhi letter No.F.1-7/2007 (CPP-I/C) dated 20<sup>th</sup> April 2012.**

**(Name of the President/Secretary of Trust/ Society)**