



PROFORMA-20

Self-Assessment Exercise

Development of SAR by Program Teams			
Program # 01			
Department Name			
Program Name			
Program Team Formed			
	No. of Criteria Covered (out of 8)		
	No. of Standards Covered (out of 31)		
Program Team Report Completed	No. & Type of Surveys completed (out of 10)	Surveys Conducted (04) 1. Surveys Not Conducted (06) 1. Reason: 2. Reason:	
QEC Review of the Program Teams	Date of Submission of the Report Report returned to PT and further submission by PT		
Report	Report Finalized		

Development of SAR by Program Teams			
	Program # 02		
Department Name	Department Name		
Program Name			
Program Team Formed	No. of Criteria Covered (out of 8)		
Program Team Report Completed	No. of Standards Covered (out of 31) No. & Type of Surveys completed (out of 10)	No. of Standards Covered (out of 31) Surveys Conducted (04) 1. Surveys Not Conducted (06) 1. Reason: 2. Reason:	
	Date of Submission of the Report		
QEC Review of the Program Teams Report	Date of Submission of the Report Report returned to PT and further submission by PT Report Finalized		



Assessment of SAR by Assessment Teams

Assessment Exercise by Assessment Teams		
Program # 01		
Department Name		
Program Name		
Assessment Team Formed		
Date of Assessment Team		
Date of submission of AT Report		
Date of AT exit meeting with the Dean, PT & Faculty		
Submission of Executive Summary to VC by QEC		
Date of Submission of Implementation plan to VC		
Evidence		

Assessment Exercise by Assessment Teams		
Program # 02		
Department Name		
Program Name		
Assessment Team Formed		
Date of Assessment Team		
Date of submission of AT Report		
Date of AT exit meeting with the Dean, PT & Faculty		
Submission of Executive Summary to VC by QEC		
Date of Submission of Implementation plan to VC		
Evidence		

S. No.	Programs for which Implementation plan finalized/ approved	Weaknesses Identified	Actions Taken
1.	Program # 01		
2.	Program # 02		

c)	If Self Assessment Process not completed in the departments, then specifies the reasons:
d)	Provide action plan for the completion of SA process (specifying time frame for each step not undertaken on the following format) in the departments:
e)	If no action taken against the weaknesses identified in the Implementation Plans for the departments, then specify the reasons & the expected time frame.



f)	If feedback on all the Proformas not compiled for the departments, then specify the reasons and time frame for the evaluation of feedback:	·
g)	Submissions:	
O,	The copies of all documents are attached:	
	1.	
	2.	
	3.	
	4.	
EN	IPOWERING THE QEC	
a.	Workshops/ Trainings/ Meetings attended/ organized by QEC at national /internativel for awareness on the subject	ational
	S. No Title of the event Date Purpose of the event (Participation/Contribution)	
b)	If paper presented in a national/international forum on QA, give details (title, author conference etc.):	,
c)	Membership of national/ international bodies obtained by the QEC	
	S. No Name of the International organization/ body Date when acquired	
d)	If no membership obtained, then specify the reasons & time frame for acquiring membership:	
	·	
e)	Nonvoting membership of the statutory bodies of the university acquired by the QEC	head
	S. No Name of the Statutory Body Date when acquired	
	1	

A.

f) If no membership obtained, then specify the reasons & the expected time frame for



		acquiring membership:			
g)		QEC website development and relevant information uploaded			
		S. No Activity/Status/Information Uploaded			
	h)	If website/ relevant information not uploaded, then specify the reasons & time frame for making the QEC website functional:			
	i)	QEC expenditures incorporated in university's recurring budget (Yes/No)			
В.	Tin 1. 2. 3. 4. 5.	me bound future course of action for the next quarter			
		t each activity of significant importance accomplished for enhancing the standard of education university date wise briefly and clearly. A copy of the supporting literature i.e., minutes			
	3. 4. 5.				



D. Endorsement:

The report should be signed by report the Vice Chancellor of the Institution.	writer (QEC Head or a person authorized on his behalf) and
	Person Responsible
Division OFC	
Director QEC:	
Worthy VC:	