

**ANNUAL REPORT 2010-2011**  
(Format for Academic Departments)

1. Name of the School :

  - (a) Name of the Department :
  - (b) Year of Establishment :
  - (c) Year of First Intake of Student :

  
2. (a) Name of the Head of Department :
- (b) Phone No. Department :
- (c) Residence :
- (d) Email :
- (e) Dept. Fax :

3. **Brief Introduction:**

4. **Position of Teaching Faculty**

Sl.No.	Name	Designation	Degree & University/Institute from which awarded	Subject Specialisation

5. **Student Intake**

**6. Teaching and Non Teaching Staff in the Department**

Designation	SC				ST				OBC				Gen.				Others			
	Reg.		Cont.		Reg.		Cont.		Reg.		Cont.		Reg.		Cont.		Reg.		Cont.	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Professor																				
Associate Professor																				
Assistant Professor																				
Technical Assistant																				
LDC																				
Peon																				

**7. (a) Details of the Courses Conducted by the Department**

I Semester	Course Title	Course in-charge

II Semester	Course Title	Course in-charge

III Semester	Course Title	Course in-charge

IV Semester	Course Title	Course in-charge

7 (b) Courses Conducted by the Department for M.Phil/Ph.D Programme

Courses	Compulsory/ Optional/ Practical	Number of Credits	Name of the Course in-Charge

8. Allied and Cognate Subject to the Department

Allied Subject	Cognate Subject

9. Student Particulars

Sl.No.	Courses	SC		ST		GENERAL		OBC		TOTAL	
		M	F	M	F	M	F	M	F	M	F

10. **Details of Student Registered for Ph.D Programme**

Sl.No.	Name of the Scholars	Registration No.	Title of Ph.D Dissertation	Name of Supervisor

11. **Details of Research Scholar who are receiving Fellowship/Financial Support**

Sl.No.	Name	M.Phil/Ph.D	Name of the fellowship

12. **Details of Seminars/Conferences/Workshops/Symposium attended by Teaching Faculty**

13. **Major/Minor Research Projects at the Department**

Name of Principal Investigator	Year/Date of Sanction	Title of the Project	Funding/Sponsoring Agency with Amount
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14. **Number of candidates qualified for the Ph.D. Degree**

Sl.No.	Name	Title of Thesis	Supervisor
1.			
2.			

**15. Number of Candidates Qualified in NET/SLET Examination**

Category	NET/SLET for Lectureship				NET/SLET for Junior Research Fellowship			
	June 2009		December 2009		June 2009		December 2009	
	M	F	M	F	M	F	M	F
SC								
ST								
OBC								
General								
Others								
Total								

**16. Any other information/ Highlights/Activities relating to the Department.**

**17. Details of Publication of Faculty .**