	DEPARTMENTAL ACADEMIC AUDIT PROFORMA
G	Iru Jambheshwar University of Science and Technology, Hisar-125001
	Format for submission of Academic Audit Report (AAR)
	Profile of the Department
	Academic Session:
1.	Name of the Department:Website Link:Email:Ph. No:
2.	Name of the Chairperson Email Contact No:
3.	Name of the Department IQAC Coordinator: Email: Contact No:
4.	Year of Establishment:
5.	Accreditation Status (NBA etc): Approval Status (AICTE/PCI etc.)
6.	No. of Posts Sanctioned (Teaching): i) i) No. of Posts Filled : ii) No. of Faculty on contract: No. of Posts Sanctioned (Non-Teaching): No. of Posts Filled

	I-CURRICU.	LAR ASI	PECTS	
	Item/Activity	Impression of Academic Advisor with grade A (Very Good)/ B (Good)/ C (Satisfactory) After observation		Recommendati on/Suggestions/ Remark by Academic Advisors
		Grade	Actual Status	
1.	Implementation of Academic Calendar (Yes/No)			
2.	Semester-wise Curricular Plans (Yes/No)			
3.	Record of Semester-wise Activity (Yes/No)			
4.	Semester-wise Add-on Courses (Yes/No) If Yes, please specify			
5.	Coverage of Syllabus (Average Percentage)			
6.	Teaching of Foundation Courses (Yes/No) If Yes, please specify			
7.	Teaching of courses on Environmental Science and Ethics/Human values/Sustainability (Yes/No)			
8.	Maintenance of Student Attendance Registers (Yes/No)			
9.	Mechanism for feedback on curriculum from students (Yes/No)			

	II-TEACHING,	LEARNI	NG & EVALUATIO	N
	Item/Activity	-	ion of Academic with grade	Recommendation/ Suggestions by Academic
		A (Very Good)/	Advisors
		B (Good)/	
			Satisfactory)	
		After ob	servation	
		Grade	Actual Status	
1.	Programme-wise strength of students			
2.	 Catering to student diversity: a. Socio-Economic diversity (State the percentage of students from Gen., SC, BC, EWS etc.) b. Gender Ratio (State No. of Male and Females) c. Regional/National//International Diversity (State the percentage of students from states other than Haryana and outside India) 			
3.	Adherence to Academic Calendar (Yes/No)			
4.	Teaching Plans (Yes/No)			
5.	Continuous Evaluation Mode (Yes/No)			
6.	Course-wise Result Analysis (Yes/No)			
7.	Teaching and Evaluation Reforms (Yes/No)			
8.	Remedial Classes (Yes/No)			
9	Invited lectures organized (Yes/No) If yes, please specify			
10.	Whether POs and COs are communicated to the students and displayed on the university website (Yes/No).			
11.	Mechanism of feedback for Teaching Learning Process from students (Yes/No)			

	III-RESEAR(CHAN	ID CONS	ULTANCY	
	Item/Activity	Impression of Academic Advisor with grade A (Very Good)/ B (Good)/			Recommendation/ Suggestions by Academic Advisors
		C	(Satisfa	ctory)	
		0	observati	•	
		Grade		Actual Status	
1.	No. of Faculty who guide Doctoral Research				
2.	No. of Research Scholars No. of Research Scholars with Fellowships (JRF/DST/UGC etc.)				
3.	No. of Ph.D awarded				
4.	Major/Minor Research Projects/Other grants a. Ongoing b. Completed				
5.	No. of Copyrights No. of Patents				
6.	Research Awards				
7.	Research Papers Published in Academic year (International /National Journals)				
8.	Research Papers Published in Academic year (International /National/ State Level Conferences)				
9.	Book Chapters contributed to Edited Volumes				
10.	Papers Presented in Academic year (International/ National/ State level conferences)				
11.	Books Published in Academic year (Single Author/ Co Author)				
12.	Seminars/Workshops/ Training Program Conducted in Academic year (International/National/ State)				
13.	Consultancy work undertaken in Academic year				
14.	MOUs in Academic year with institutes of national/international excellence /industries				
15.	Innovation if any				

	IV-EXTENSION ACTIVITIES				
	Item		ion of Academic with grade Very Good)/ Good)/ Satisfactory) servation	Recommendation/Sug gestions by Academic Advisors	
		Grade	Actual Status		
1.	Extension Activities Conducted (Yes/No)				
2.	Number of students enrolled in: a. NSS b. NCC c. Any other				
3.	Participation at university/inter- university/ state/national/international level a. Sports b. Cultural Activities				
4.	Any other Activities through Departmental Clubs or other means				

	Item		Impression of Academic Advisor with grade		Recommendation/Suggestions by	
				-	Academic Advisors	
		A		/ery Good)/		
		B	(6	Good)/		
		С	(S	atisfactory)		
		After	obs	servation		
1.	Students trained in different verticals Specialized Trainings (Yes/No)					
2.	Number of students placed (Programme-wise)					
3.	Name of Career Guidance Coordinator: Email: Contact No:					
4.	Name of Alumni Coordinator: Email: Contact No:					
5.	Alumni Association Activities (Yes/No)					
6.	Grievance Redressal Cell /Anti Ragging Cell (Yes/No)					
7.	Gender, Environment Sensitization Programmes Conducted					
8.	List the Awards and Prizes earned by students					
9.	Mentoring /Counseling System (Yes/No)					
10.	Progression of students a. Higher Education b. In service c. Self- employed/Entrepreneurs					
11.	No. of students who qualified NET/SLET/JRF/GATE/GP AT etc.					

	V	-INFRA-	STRUCTURE	
	Item	Advisor A (B (C (sion of Academic with grade Very Good)/ Good)/ Satisfactory) oservation Actual Status	Remarks/Recommendation/S uggestions by Academic Advisors
1.	Adequate Infra-structural Facilities (Yes/No) a. Students b. Academic Administration and Faculty c. Non-Teaching Staff	Ulaue	Actual Status	
2.	Total No. of Classrooms: No. of ICT enabled Classrooms:			
3.	Number of Labs: Adequate equipment (working condition) (Yes/No)			
4.	Availability of Sufficient Computing Facilities (Yes/No)			
5.	Availability of Internet Services (LAN/WIFI)			
6.	Basic Amenities: Availability of Drinking water (Yes/No) Maintenance of Hygiene and Sanitation (Yes/No) Availability of First-aid facilities (Yes/No) Availability of Facilities for Differently-abled person (Yes/No)			
7.	List the Equipment Purchased			

	VII-GOVERNANCE AND LEADERSHIP						
	Item	Impression of Academic Advisor with grade A (Very Good)/ B (Good)/ C (Satisfactory) After observation		Recommendation/Suggesti ons by Academic Advisors			
		Grade	Actual Status				
1.	Vision and Mission of the Department (Yes/No)						
2.	Record of functioning of Staff Council/DRC/BOSR/any other committee is maintained (Yes/No)						
3.	Do the members of various committee are given sufficient notice for the meetings (Yes/No)						
4.	Physical Stock Verification (Yes/No)						
5.	Availability of Annual Perspective Plan (Yes/No)						

		VI	II-BEST PRAC	TICES
	ltem	Impression of AcademAdvisor with gradeAA(Very Good)/B(Good)/CC(Satisfactory)After observationGradeActual Sta		Recommendation/Suggestions by Academic Advisors
1.	Mention any two best practices adopted by the Department	Graue	Actual Status	
2.	Describe any Distinctive/Innovative features			
3.	Any other remarks			
	Signature of	Chairperson		Signatures of Academic Supervisors

Note:

- 1. The Chairperson of the Department must make sure that the information provided in this proforma is based on the documentary evidence present in the Department.
- 2. The Chairperson of the Department may add any additional information in the form of annexures.