



OSMANIA UNIVERSITY
HYDERABAD-500 007

No. 443 -MR/H-Education-ICs-/19-20/Acad/IV-2

Dt: 09-04-2019.

To
The Secretary/Principals of all the
Colleges offering B.Ed/M.Ed/ D.PEd/B.PEd and Spl.Edn Courses
Affiliated to Osmania University

Sub: Affiliation - Affiliated Colleges – Inspection for considering grant of Extension of provisional affiliation to offer B.Ed/M.Ed/D.PEd/B.PEd and Spl.Edn Courses for the academic year 2019-2020– Reg.

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Sir/Madam,

With reference to the subject cited, I am desired to inform you that the University has decided to conduct inspection to the Colleges offering B.Ed/M.Ed/ D.PEd/B.PEd/Spl.Edn Courses for considering grant of extension of provisional for the academic year 2019-20 (Inspection Schedule will be informed later).

The Inspection proforma for grant of extension of provisional affiliation for the year 2019-2020 can be downloaded from University website (www.osmania.ac.in).

You are therefore, requested to keep the following records in Original ready along with one set of Xerox copies for verification by the Inspection Committee. Further you are required to keep the enclosed proforma ready duly filled in along with the documentary evidence wherever required.

1. Latest compliance report.
2. List of approved teaching staff in the prescribed format.
3. Minutes of the Selection Committee for the existing teaching staff.
4. Minority Status Certificate/Letter.
5. Affiliation Orders of the University for the Academic year 2019-2020.
6. Land Documents (enclose registered sale deed copies).

Contd.....2

(2)

7. Details of accommodation Room wise, floor wise and details of accommodation allocated course wise.
8. Staff Attendance Register, Teaching Diaries.
9. Student Attendance Registers.
10. Copies of the Time-table (theory and practicals) clearly marking the Class and initials of teachers in each room.
11. Library Accession Register – with details of books/Journals added during the last academic year.
12. Library /Books Issue Register.
13. Acquittance Register.
14. Minutes of the Governing Body meetings.
15. Bills/Payment receipts/Bank Statement for the purchase of Library Books and Journals and other purchases including equipment, Computers etc.
16. Statement of consolidated attendance which was sent to the Examination Branch during the last academic year.
17. Bank Pass Book/Bank Statement of the financial transactions/Salary payments.
18. Enclose the Report of Anti-Ragging Committee and measures taken by the College.
19. Display the College name prominently stating that the College is affiliated to Osmania University and also enclose photograph of the College Building.

The management of the College is requested to remit the Inspection and Processing Fee of Rs.20,000/- through a Demand Draft drawn in favour of "Registrar, Osmania University" and submit the same to the University on or before 10-05-2019.

You are further requested to ensure that all the teaching staff of your College be present on the day of inspection, failing which their names will not be considered as on the rolls of the College.

Yours faithfully,

DEPUTY REGISTRAR
(Academic)

Copy to

1. The Dean, Faculty of Education, OU
2. The Head, Dept. of Education/Physical Education, OU.
3. The Principal, University College of Education/Physical Education, OU.
4. The Director, Directorate of Academic Audit, OU.
5. The Director Infrastructure with a request to place it on the University Website.



OSMANIA UNIVERSITY

**FORMAT FOR SUBMISSION OF INFORMATION TO THE INSPECTION COMMITTEE OF B.Ed/M.Ed/
D.PEd/B.PEd/ Spl.Edn PROGRAMME FOR THE ACADEMIC YEAR 2019-20**

College Code _____ DD.No. _____

Dt _____ Amount of Rs.20,000/-

Whether compliance report submitted for the academic year 2018-19 Yes / No

Sl. No.	Particulars	Facts
I. General Information about the college		
1	Name of the College And code given by the NCTE	
2	College Address	
3	Mobile/Telephone no. with Std. Code	
4	Name, address & Tel. No. (with Std. Code) of the Secretary / Correspondent and Principal	
	a) Landline no.	
	b) Mobile no.	
	c) Mail ID	
	d) Whether the College is accredited by NAAC	Yes/No If Yes, Grade
5	Date, Month & Year of establishment	
6	Whether the College has shifted to its own premises after completion of (3) academic years as per NCTE norms	
7	Current programmes offered by the institution	
	1.	
	2.	
	3.	

Signature of the Principal

Signature of the Secretary and Correspondent with seal

Note: Please enclose details in separate sheets wherever it is required

8	Address as per the NCTE recognition certificate	
9	Copy of the CD submitted to the NCTE and photograph of the College Building	
10	(a). Whether the College is running in the building, shown to the NCTE & to the earlier inspection committees of OU.	
	(b). If no, whether permission has been obtained for shifting the premises.	
11	Whether there are other Courses offered in the same building. If so, kindly furnish details	
12	If minority – status of minority certificate, order no. and date (Enclose a copy)	
SOCIETY DETAILS :		
13	Under which revenue division the society has been accorded permission for establishing the college	
14	In which revenue division is the college functioning at present?	
15	Society Registration No. and Date	
16	Names of the office bearers of the society (Provide a list with address/ tel.no./ age/etc)	
17	Registered Byelaws of the society (Please enclose a copy)	
18	Are there any changes in the name and status of the society? (Pl. mention whether the society has undergone any changes since its birth / due to addition of new members / etc.)	

19	<p>General Facilities:</p> <p>i) Principal Room () ii) Number of Class Rooms () iii) Seminar Hall ()</p> <p>iv) Office Room () v) Library/Reading room () vi) Staff Room ()</p> <p>vii) Girls Waiting Room () viii) Drinking Water Facility ()</p> <p>ix) Separate Toilets for Girls/Boys/Staff () xi) Store Room ()</p> <p>x) Separate Common room for Boys and Girls () xii) Parking Space ()</p> <p>xiii) Multipurpose play field () xiv) Play ground ()</p> <p>xv) Architectural Barrier free facilities () xvi) Multipurpose Hall ()</p> <p>xvii) Visitor's Room xviii) Canteen ()</p>	
19 (a)	<p>1. Each class room shall be equipped with LCD Projector, Smart Board, Internet Connection etc.</p> <p>2. Seminar Hall shall have proper furnishing and equipment such as LCD Projector, Smart Board, P A system and Executive chairs.</p> <p>3. Every Institute should have MOOCS facility Centre and Innovation Laboratory.</p>	
II. Assets of the Institution / Society		
20	<p>Is the Building Plan approved by the competent authority? If Yes, please provide details</p> <p>a) Plinth area of the college building (in Sq.Mts)</p> <p>b) Nature of the building (RCC roof/Sheds)</p> <p>c) Room wise dimensions along with Floor wise details (in Sq. Mts)to be enclosed.</p> <p>d) Total plinth area available in the college (in Sq.Mts).</p> <p>e) Whether the College is running in single building or multiple buildings</p> <p>f) If running in more than one building No. of Buildings: (Copies to be enclosed)</p> <p>g) Any other courses/Colleges Functioning in the same premises (If yes details to be furnished along with the permission letter from the competent authority)</p> <p>(like Junior Colleges, Diet College etc)</p>	

Signature of the Principal

Signature of the Secretary and Correspondent with seal

Note: Please enclose details in separate sheets wherever it is required

21	<p>Laboratory Facilities (B.Ed/M.Ed): Curriculum Lab</p> <p>i) Natural Science Lab : Available/Not Available ii) Mathematics Lab : Available/Not Available ii) Social Studies Lab : Available/Not Available iii) Psychology Lab : Available/Not Available Art and Craft Resource Centre : Available/Not Available Health and Physical Education Resource Centre (including yoga education) : Available/Not Available iv) ICT Resource Centre : Available/Not Available vi) Language Lab : Available/Not Available</p>																										
22	<p>Laboratory Facilities (B.PEd/D.PEd):</p> <p>i) Educational Technology Lab : Available /Not Available ii) Anatomy, Physiology & Health Education Lab : Available /Not Available iii) Human performance (Exercise Physiology) Lab : Available /Not Available iv) Physiotherapy, Athletic Care and Rehabilitation Lab : Available /Not Available v) Sports Psychology Lab : Available /Not Available</p> <p><u>Equipments :</u></p> <table border="1" data-bbox="250 943 1419 1381"> <thead> <tr> <th>Equipment</th> <th>Available / Not available</th> <th>Adequate / Inadequate</th> <th>Equipment to be added</th> </tr> </thead> <tbody> <tr> <td>Sports and field equipments</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Athletic event equipment</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Sports and games material</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Equipment for indigenous activities</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Gymnastics Apparatus</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Equipment	Available / Not available	Adequate / Inadequate	Equipment to be added	Sports and field equipments				Athletic event equipment				Sports and games material				Equipment for indigenous activities				Gymnastics Apparatus			
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24	<p>Details of salary paid. Acquittance Register to be produced.</p> <p>Enclose Bank Statement</p>	<p>Maximum Salary/ Minimum Salary paid</p> <p>Paid through Cheque/Cash</p>																									

III. Governing Body of the Society / College	
25a.	University nominee on the Governing Body of the college (provide name /address / designation / period of tenure details)
b.	Governing Body meetings conducted so far with dates / schedule (Enclose a copy of minutes of the meeting)
c.	University nominee on the Selection Committee (provide name/ address / designation / period of tenure details)
26	Univ. Nominee as Subject Expert (provide name/ address / designation / period of tenure details)
27	Time table indicating papers, teachers and project wise
28	Parent teacher association
29	Alumni association of the College
30	Steps taken for free from architectural barrier.
31	No. of staff council and student council meetings(enclose a copy of the minutes)
32	Does the institution taken extension and community participation programme (provide details)
33	Audit report for the financial year 2018-19 (copy to be enclosed)

34. Whether the College has provided the safeguard against fire hazard in all parts of the Building.

35. Whether the College has taken appropriate measures for prevention of ragging in any form, in the light of directions of Supreme Court of India.
(Enclose the copy of the Committee constituted)

36. Whether the College has uploaded the faculty information in the University website www.osmania.ac.in as per the Circular issued by this Office No.104-MR/H/2011-12/Acad/IV, Dt 24-02-2012 (Enclose the copy of the same)

Signature of the Principal

Signature of the Secretary and Correspondent with seal

Note: Please enclose details in separate sheets wherever it is required

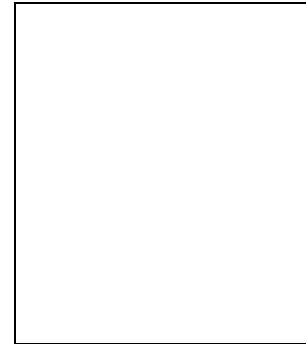
37. List of the teaching staff for the year 2018-19.

Sl.No.	Name of the Teacher/Designation	Date of Birth	Methodology	Qualification	Univ. where studied	Division & percentage	Experience	Nature of appointment		Aadhar & PAN No.
								Through OU Selection Committee	Management	
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
11.										

B.Ed : For a unit of 50 students Faculty required is 8 (1+7); For two units (50 + 50) students Faculty required is 16 (1+15).

M.Ed : For a unit of 50 students Faculty required is 10 (2+2+6).

38. Furnish the details of faculty position for the year 2018-2019 submitted to the NCTE (Copy to be enclosed)



UNDERTAKING

I, Mr.Mrs _____

S/o /D/o/W/o _

Hereby declare that I am working as a Principal/Lecturer in _____College of Education

I am not working in any other Government/. Private Institution(s) even on part-time basis. If the present information/declaration of mine is proved to be false, I am liable for any legal/administrative/disciplinary action as per norms. Further, I will continue my services in the above institution for the academic year _____

Name :

Signature

Date:

COUNTERSIGNED
Secretary/Correspondent & Principal

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DECLARATION

We hereby, declare that the information furnished in the application is correct and we are liable for any disciplinary action, if found otherwise. Further, we undertake to provide required accommodation / Laboratories and other necessary infrastructure required for running B.Ed/M.Ed/ D.PEd/B.PEd/ Spl.Edn college as per the NCTE/RCI/OU norms

Signature of the Principal**Signature of the Secretary and Correspondent with seal**