

BENGALURU NORTH UNIVERSITY

Report of the Local Inquiry Committee on the grant of Fresh Affiliation
to..... **College** for the year 2018-19

Ref:

Date of Inspection:

I. THE COMMITTEE

1.		Chairperson
2.		Member
3.		Member
4.		Subject Expert
5.		Convenor

II. THE COLLEGE

1.	Name and address of the College	
2.	Name of the Management	
3.	Whether it is run by SC/ST/ Minority	
4.	No of Governing Council Members	
5.	Name of the Identified Principal with qualification and phone number	

III. COURSE PARTICULARS

Course	Intake sought

IV. NEED AND FEASIBILITY FOR STARTING THE COLLEGE

1.	Proposed Area of the College	
2.	The No.of Institution/colleges offering similar courses in the vicinity	
3.	The No.of feeder Institutions in the University.	
4.	Availability of transport and Communication facilities in the locality	
5.	Any other facilities/observations	

V. ADEQUACY OF FACILITIES AVAILABLE IN TERMS OF		
1.	Total, extent and suitability of land	
2.	Building – Specify own or rented	
3.	Built-up area	
4.	a) No. of Class rooms	
	b) Size of each class room in Sq.ft.	
5.	a) Laboratory	
	b) Size of each lab in Sq.ft.	
6.	Laboratory Equipments	
7.	Library	
8.	No. of Computers in IT Lab	
9.	Internet facility	
10.	Principal room	
11.	Office room	
12.	Staff rooms (Nos. & sizes)	
13.	Ladies room	
14.	Toilets for students (Boys / Girls)	
15.	Auditorium	
16.	Water and power supply	
17.	Sports facilities	
18.	Hostel	
19.	Canteen Facility	
20.	Furniture	

VI. ADEQUACY OF STAFF		
1.	Details of teaching staff identified	
2.	Details of non-teaching staff identified	
3.	Details of Librarian identified	
4.	Details of P.E. Instructor identified	

VII. FOR PROFESSIONAL COLLEGES		
1.	Approval from concerned professional Statutory Bodies/AICTE/NCTE/RCI	
2.	Availability of relevant facilities such as Hostel etc.,	
3.	Fulfillment of prescribed norms	

VIII. ASSETS OF THE TRUST/SOCIETY PROPOSING THE COLLEGE AND ADEQUACY		
1.	Immovable property details	
2.	Movable property details	
3.	Bank Balance, Deposits & Security	
4.	Fund allocation for college expenses	

IX. REQUIREMENT TO BE FULFILLED

X OBSERVATION/CONDITIONS

XI. RECOMMENDATIONS			
Sl. No.	Course	Combination	Intake Recommended
1			

Signatures of the Chairman and Members of the committee