

PART- I

GUJARAT AYURVED UNIVERSITY JAMNAGAR

**VISITATION PROFORMA FOR ASSESSMENT OF TEACHING AND PRACTICAL TRAINING
 OF AYURVEDIC PHARMACEUTICAL SCIENCES COLLEGE**

(To be filled up by the Principal and countersigned by Secretary or President of the Society)

Section 'A'-General Information

I. INFORMATION OF COLLEGE

1.	Date of Visitation		
2.	Name of the College with Complete Address including pin code (mentioning taluka, dist. and other details)		
3.	Information of communication		Contact No. of College
			Contact No. of Hospital
			Fax
			Email
			Website
4.	Information of Principal		Name
			Office Tel. No.
			Residence Tel. No.
			Mobile No.
5.	Whether Government / Grant-in-aid / Private / Statutory College of University		
6.	Year of Establishment of Society / Trust		
7.	Year of Establishment of College		
8.	Information of President / Secretary of Society/Trust of College (For Private / Private Aided college)		Name & Address
			Office Tel. No.
			Residence Tel. No.
			Mobile No.
9.	Information of University / Statutory University	1. Vice chancellor	Name
			Office Tel. No.
			Mobile No.
		2. Registrar	Name
			Office Tel. No.
			Mobile No.
10.	Important information of connectivity	Name of Nearest Airport &	1.
			2.

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		Distance (km)	3.
		Name of Nearest Railway station & Distance (km)	1. 2. 3.
11.	Fee Structure	For Management seats	
		For Government seats	
		Name of the fee fixation authority	
12.	Year of 1 st permission of State Govt.		
13.	Date & Year of First Permission of GAU with Intake Capacity		
14.	1 st affiliation of University.	Name of University	
		Year of 1 st affiliation	
15.	At Present Intake Capacity	Course	Intake Capacity
		UG	
16.	Name of nearest Police Station	Name & Address	
		Telephone Number	
17.	Name of other Ayurvedic Pharmacy Colleges within radius of 50 km		

II. DETAILS OF LAND

1.	Total area of land with Society/Trust (in acres)	
2.	Ownership of land (Own/Lease/Rented)	
	In the name of the Society/Trust	
	In the name of President/Secretary	
3.	Whether entire land is in one plot or more than one. If more than one, then size and distance between these plots	
4.	Whether the land available with the Society/Trust is entirely for Ayurvedic Pharmaceutical Sciences College and attached Hospital or for any other Institute also, if so, details thereof.	
5.	Information regarding other institutions/colleges run by the same society/trust. Whether they are in same building/campus.	
6.	Whether College and Hospital building are in same premises	Yes/No
	If no, distance between College and Hospital in km.	
7.	Total area of land allotted to the Ayurvedic Pharmaceutical Sciences college (in acres)	
8.	Total area of land allotted to the hostels (in acres)	
9.	Name of other institutions running in the campus of Ayurvedic Pharmaceutical College	
10.	Whether the College and Hospital building have ever been shifted to some other place since 2003.	Yes/No
	If yes, then how many times it has changed the place and whether all the necessary formalities/permission had taken place (Please furnish a copy of relevant documents duly certified)	
11.	Whether the management/society of college (in case of private	Yes/No

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	College) has ever changed since 2003.	
	If yes, whether all the necessary formalities/permission had taken place (Please furnish a copy of relevant documents duly certified)	
12.	Approval from state government for total no. of seats to be filled by the management / society of college for this course.	Yes / No*
13.	Approval from GAU for total no. of seats to be filled by the management / Society of college for this course.	Yes / No*
14.	Whether the management/society of college has own Ayurved Pharmacy.	Yes / No
	If no, MoU's with other Ayurvedic Hospital (Please furnish a copy of relevant documents duly certified)	

* Attach annexure of approval of seats for this course

SECTION B

INFORMATION OF THE COLLEGE

I. AREA OF COLLEGE

Sr.No.	Particulars	Required Area (in Sq.mt) upto 60 intake	Available Area
	TOTAL CONSTRUCTED AREA OF COLLEGE	2380	
1.	Administrative wing a. Principal's Chamber b. Office – I – Establishment c. Office – II – Academics d. Confidential Room e. Meeting Hall (Staff)	260 50 60 60 30 60	
2.	Lecturer Hall	300 (4 classroom x 75)	
3.	Seminar / Conference / Exam Hall	300	
4.	Auditorium / Multi Purpose Hall (Desirable)	600 500 seating capacity	
5.	Library	300	
6.	Teaching Departments	580	
	a. Rasashastra & Bhaishajya Kalpana – I I – Instrument Room II – Store Room	100 30 30	
	b. Pharmaceutical Chemistry	120	
	c. Sharir	100	
	d. Computer	100	
7.	Canteen	100	
8.	Herbal Garden	Adequate Number of Medicinal Plants	

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I – A. HERBAL GARDEN

Sr.No.	Particulars	Requirement	Available
1.	Area	1000 sq.mt	
2.	Total number of Medicinal plants with name (List to be enclosed)	200	
3.	Irrigation facility – available/not available	yes	

II. STAFF FACILITIES:

Sr. No.	Name of infrastructure	Requirement as per Norms in number	Requirement as per Norms, in area	Available		Remarks/ Deficiency
				No.	Area in Sq Mts	
1.	Faculty Rooms for B. Pharm. (Ayu.) course		10 Sq Mts. x n (n=No of teachers)			
2.	Library Staff	Librarian Assist. Librarian	10 Sq Mts. x 2			

III. STUDENT FACILITIES:

Sr. No.	Name of infrastructure	Requirement as per Norms, in area	Available		Remarks/ Required
			No.	Area in Sq. Mts.	
1	Girl's Common Room (Essential)	60 Sq. Mts.			
2	Boy's Common Room (Essential)	60 Sq. Mts.			
3	Toilet Blocks for Boys	24 Sq. Mts.			
4	Toilet Blocks for Girls	24 Sq. Mts.			
5	Drinking Water facility – Water Cooler (Essential).	5 Sq. Mts., each floor			
6	Boy's Hostel (Desirable)	9 Sq. Mts. / Room Single occupancy			
7	Girl's Hostel (Desirable)	9 Sq. Mts. / Room (single occupancy) 20 Sq Mts. / Room (triple occupancy)			
8	Power Backup Provision (Desirable)	----			

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III – A. DETAILS OF HOSTEL

Hostel	Area (sq.mtr.)	Own / Rented	No. of Rooms	Capacity	Mess facility (available/not available)	Warden (available/not available)
Boys						
Girls						

IV. AMENITIES

Sr. No.	Name	Requirement as per Norms in area	Available		Not Available	Remarks/ Deficie
			No.	Area in Sq.		
1.	Principal quarters	80 Sq. Mts.				
2.	Staff quarters	16 x 80 Sq. Mts.				
3.	Canteen	100 Sq. Mts.				
4.	Parking Area for staff and students					
5.	Bank Extension Counter					
6.	Co-operative Stores					
7.	Guest House	80 Sq. Mts.				
8.	Transport Facilities for students					
9.	Medical Facility (First Aid)					

V. DETAILS OF COLLEGE DEPARTMENTS

Sr. No.	Department / Subject	No. of Dept. Library Books	No. of Charts	No. of Models /Specimen	No. of Proposed Lectures / Practicals carried out in the Academic Year 2014-15	
					Theory	Practical
1.	Rasashastra & Bhaishajya Kalpana –I					
2.	Pharmaceutical Chemistry (Organic & Inorganic)					
3.	Sharir					
4.	Fundamentals of Ayurved & Swasthavritta					
5.	Computer					
6.	Dispensing, Community & Hospital Pharmacy					
7.	English					
8.	Sanskrit					

* Detail list of instruments and equipments attach separately.

VI. DETAILS OF VARIOUS SECTIONS

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LIBRARY

Sr.No.	Details	Number of Books available
1.	Number of books	
(i)	Subjective Books	
(ii)	Medical Journals / Pharma Journals	
(iii)	Others (Unani / Siddha, etc.)	
(iv)	Total number of books	
2.	Number of seats available in reading room (At least 50 Seats for 60 Intake & 80 Seats for 100 Intake)	
3.	Number of computers with internet facility	

VII. INFORMATION OF TEACHING STAFF

Sr. No.	Department / Subject	Number of Teachers required as per GAU Norms			Number of Existing Teachers			Total
		Professor	Associate professor	Assistant Professor	Professor	Associate professor	Assistant Professor	
1.	Rasashastra & Bhaishajya Kalpana – I			1				
2.	Pharmaceutical Chemistry			1				
3.	Sharir			1				
4.	Fundamentals of Ayurved & Swasthavritta			1				
5.	Dispensing, Community & Hospital Pharmacy			1				
	TOTAL			5				

Note: - Detailed information of teaching staff be furnished as per Annexure-I

VIII. INFORMATION OF VISITING FACULTIES

Sr. No.	Subject	Faculty Name

Note: - Attach Separate sheet of Details of Visiting Faculties Annexure - II

IX. DETAILS OF TECHNICAL & OTHER STAFF

Sr.No.	Department	Post	Requirement	Available
1.	Library	Librarian	1	
		Assistant Librarian	1	
		Library Attendant or Peon	2	
2.	College Office	Clerical staff for administrative and accounts	4	

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		services	1	
		Office Superintendent	1	
		Computer Data operator	3	
		Store keeper & Peon		
3.	Rasa Shastra & Bhaishajya Kalpana	Laboratory Technician	1	
		Laboratory Attenders	1	
4.	Pharmaceutical Chemistry	Laboratory Technician	1	
		Laboratory Attenders	1	
5.	Sharir	Laboratory Technician	1	
		Laboratory Attenders	1	
6..	Herbal Garden	Gardener	1	
9.		Cleaning Personnel	1 for Each Floor	
TOTAL			20	

Note: - Detailed information of technical & other staff be furnished as per Annexure-II Laboratory Assistant to be appointed 1 for 2 departments

X. ADDITIONAL REQUIREMENTS

1.	College Council	Available / Not Available
i.	No. of Members	
ii.	Name of Members (Attach List)	
ii.	Yearly No. of Meetings	
2.	Information regarding college website as per norms (Mention the website address)	Yes/No Please furnish the details of information uploaded on College Website as per 9(3) of MSR.

XI. SALARY INFORMATION OF TEACHERS

Sr.No.	Pay Scale + Grade pay	Tick whichever applicable	Remarks
1.	Mode of payment through Bank	Yes/No (If no please mention reason thereof)	
2.	Pay Scale + Grade pay	Pay Scale + Grade pay of Professor	
		Pay Scale + Grade pay of Associate Professor	
		Pay Scale + Grade pay of Assistant Professor	
3.	Existing pay scale of teaching staff	State Govt./UGC/others	
4.	Teachers promotion policy as per norms of GAU	Yes/No (If no please mention reason thereof)	

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IX. FINANCIAL INFORMATION

MONTH WISE EXPENDITURE FROM 1 ST JAN 20 TO 31 ST DEC 20									
Sr. No	Month	Total salary of teaching staff	Total salary of non teaching staff	Total expenditure on purchase of new books	Total expenditure on furniture & fixtures	Total expenditure on equipments & instruments	Total purchase of raw drugs	Total purchase of Lab chemicals	Building construction and other expenditure
1	January								
2	February								
3	March								
4	April								
5	May								
6	June								
7	July								
8	August								
9	September								
10	October								
11	November								
12	December								
Total									
GRAND TOTAL OF EXPENDITURE from 1 st Jan 20 to 31 st Dec 20									
TOTAL INCOME from 1 st Jan 20 to 31 st Dec 20									

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SECTION C
OTHER ALLIED & INFRASTRUCTURE REQUIREMENTS

I. SPORTS AND GAMES FACILITY

Sports and Games Facility – available / not available	
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II. TRANSPORT FACILITY

Transport facility – available/not available	
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III. PROGRESS MADE BY THE INSTITUTION IN LAST TWO YEARS ON SALIENT POINTS

S. No.	Important Information of College	Progress made by college
1.	Construction of college and hospital building	
2.	Appointment of Teaching staff	
3.	Appointment of Non-Teaching staff	
4.	Expansion of various departments of college	
5.	Expansion of Herbal Garden, Plantation of New Plants	
6.	Any national/international/state level seminars, ROTP, etc.	
7.	Publication by college and teaching staff	
8.	Research activities if any	
9.	Awards won by teaching staffs and students	

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IV. Declaration of Principal of the College

I, _____ s/o Shri _____ Principal,
_____ (name of the College)
solemnly writing that if any information provided by me in Proforma and **Annexures** found false, I shall be held responsible in the matter. I shall have no objection if any legal action is taken by the GAU against me.

Signature of Principal

Dated _____

Place: _____

Name with Stamp

VII. Declaration of Secretary/President of the Trust / Society of the College

I, _____ s/o Shri _____
Secretary/President, _____ (name of
the Society) solemnly state that, looking after the management of the college & hospital.
The information provided by the Principal in the Proforma and **Annexures** are true. If any
information provided by the Principal found false the undersigned has no objection for any
legal action initiated by the GAU against the Principal and me.

Signature of

Secretary/President

Dated _____

Place: _____

Name with Stamp

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Signature of Principal with date

LIC proforma B.PHARM-I**LIST OF ANNEXURES TO BE SUBMITTED BY COLLEGE**

Sr.No.	Annexure Number	Name of the Annexure
1.	Annexure-I	Proforma to furnish the details of Teaching Staff
2.	Annexure-II	Details of Visiting Faculties
2.	Annexure-III	Proforma to furnish the details of Non-Teaching & Other Staff
3.	Annexure -IV	Details of Equipment & Instruments for various sections of College
	A)	Rasashastra and Bhaishajya Kalpana Laboratory (Teaching)
	B)	Pharamceutical chemistry
	C)	Sharir
4.	Annexure-V	Notarized Affidavit to be filled up by Newly Appointed Teachers after last visitation in the given format
5.	Annexure VI	Soft copy (in CD/DVD) and hard copy group photographs with Teaching staff and non-teaching staff of College and the visiting faculties separately. The name of each staff member should be mentioned on the bottom of the photograph.
6.	Annexure VII	Soft copy (in CD/DVD) of Annexure-I (Details of Teaching Staff) in MS Excel (.xls or .xlsx) format

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ANNEXURE-I

PROFORMA TO FURNISH THE DETAILS OF TEACHING STAFF

Sr. No.	Name of the Teacher			Father's Name	Date of Birth	UG Qualification (University & year)	PG Qualification with subject (University & year)	Date wise details of Experience in chronological order (1 st appointment to till date)			Department (Subject of)	Nature of present appointment (regular/ contractual/ deputation/ part time/ adhoc)	Local Residential Address	Permanent Address	Name of State Board & Registration Number	Salary Account Number , Name of Bank & Branch	Telephone Number & Mobile Number of Teacher	Photograph of Teacher (Attested by the Principal)	Signature of Teacher (At the time of visitation)
	Sur Name	First Name	Middle name					Duration	Designation	Name of the college									

Note: Please download a copy of Annexure I in MS Excel Format (.xls) from the university Website www.ayurveduniversity.edu.in and fill up the details and annex the same as softcopy in the form of CD/DVD as Annexure VII. Enclose a Printed / hard copy of the same as **ANNEXURE I** and attach the certified copies of UG Registration Certificates, experience certificates, joining Report, Relieving Order, Form No. 16 and all other relevant documents and original notarized affidavit.

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ANNEXURE-II
DETAILS OF VISITING FACULTIES

Sr. No	Name of the Teacher			Father's Name	Date of Birth	UG Qualification (University & year)	PG Qualification with subject (University & year)	Date wise details of Experience in chronological order (1 st appointment to till date)			Department (Subject of)	Nature of present appointment (regular/ contractual/ deputation/ part time/ adhoc)	Local Residential Address	Permanent Address	Name of State Board & Registration Number	Salary Account Number , Name of Bank & Branch	Telephone Number & Mobile Number of Teacher	Photograph of Teacher (Attested by the Principal)	Signature of Teacher (At the time of visitation)
	Sur Name	First Name	Middle name					Duration	Designation	Name of the college									

Note: Please download a copy of Annexure II in MS Excel Format (.xls) from the university Website www.ayurveduniversity.edu.in and fill up the details and annex the same as softcopy in the form of CD/DVD as Annexure VII. Enclose a Printed / hard copy of the same as **ANNEXURE II** and attach the certified copies of UG Registration Certificates, experience certificates, joining Report, Relieving Order, Form No. 16 and all other relevant documents and original notarized affidavit.

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ANNEXURE-III

PROFORMA TO FURNISH THE DETAILS OF NON – TEACHING & OTHER STAFF

Sr.No.	Name of Employee	Father's Name	Qualification	Date of Appointment	Nature of Appointment (regular/contractual/Part time)	Designation	Name of working department	Pay Scale

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	Knives	01 dozen	
	S.S. Cutter	02	
	Gas lighter	10	
	Axe	01	
	Darvi	02	
6.	Blender- Electric Simple	01 01	
7.	Measuring Equipments Different Sizes Glass - 50 ml. 100 ml. Plastic-500 ml. 1000 ml.	10 10 05 03	
8.	Electronic weighing machine	01	
9.	Physical balance	01	
10.	Sieves (Assorted No.)	02 sets	
11.	Mixture Grinder	03	
12.	Juice Extractor	01	
13.	Pyrometer	02	
14.	Thermometer	05	
15.	Musha (Crucible)	01	
16.	YANTRAS Dola Yantra- rods required Pithara Yantra- Sarava with hole	10 05	
17.	Putas (Different kind) Gaja puta Varaha puta	01 01	
18.	Earthen vessel- Sarava	01 dozen	
19.	Enamel Trays (Medium size)	10	
20.	Cupboard	01	
21.	Jars (For storage) ½ lt. 1lt. 2lt.	02 dozen 02 dozen 01 dozen	
22.	Racks with shelves	02	
23.	Electric Khalva	01	
24.	PH Strips	01 Set	
25.	Melting Point Detector	01	
26.	Refrigerator	01	
27.	Audio-Visual equipments	01	
28.	Digital Camera	01	

B) PHARMACEUTICAL CHEMISTRY DEPARTMENT

Sr. No.	Name of Instruments	Quantity	Available
1	Hot plate	2	
2	Oven	1	
3	Refrigerator	1	

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4	Analytical Balances for	1	
5	Digital balance 10mg sensitivity	1	
6	Digital Balance (1mg sensitivity)	1	
7	Suction pumps	5	
8	Water bath 6 holes		
9	Mechanical Stirrers	2	
10	Magnetic Stirrers with Thermostat	2	
11	Vacuum Pump	5	
12	Digital Ph meter	2	
13	Microwave Oven	1	
14	Arsenic Limit Test Apparatus	5	
15	Hot Plate	2	
16	Ultra Sonicator.	1	
17	Nessler's Cylinders	20	
18	Distillation Unit	1	
19	Water Bath	3	

C) SHARIR DEPARTMENT**C-I) ANATOMY (RACHANA SHARIR)**

Sr. No.	Required Models / Organs	Minimum Requirements	Number of Models / Organs Available
1.	Human Skeleton (Articulated) Male Female	1 1	
2.	Models – a. Digestive System b. Respiratory System c. Blood Circulatory System (Cardio Vascular System) d. Urinary System (Kidney With Bladder) e. Male Reproductive System f. Female Reproductive System g. Human Nervous System h. Spinal Cord i. Human Brain j. Human Nose k. Human Eye l. Human Ear	1 1 1 1 1 1 1 1 1 1 1 1 1 1	
3.	Human Development of Foetus (1 to 9 months)	1 each	
4.	Organs – a. Stomach b. Liver c. Duodenum with Pancreas d. Small and Large Intestine e. Heart f. Kidney g. Lungs	1 1 1 1 1 1 1	

C-II) PHYSIOLOGY (KRIYA SHARIR)

Sr. No.	Essential Instruments and Equipments	Minimum Requirements	Number of Instruments and Equipments
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			available
1.	Compound Microscopes	4	
2.	Sahli's Haemoglobinometer	5	
3.	Haemocytometer	5	
4.	Stop watches	1	
5.	Microslides	2 boxes	
6.	Cover slips, glassware		
7.	Urinometer	5	
8.	Containers of Urine (Plastic Beaker – 250ml)	5	
9.	Prepared Slides – a. Different types of WBC b. RBC c. Platelets	5 5 5	

LIST OF CHEMICALS**A) PHARMACEUTICAL CHEMISTRY**

Sr.No.	Name of chemical	Pack size ml/gm	Available
1	Acetic acid glacial LR	1Lit	
2	Sulfanilic acid	100gm	
3	Ammonium molybdate	25gm	
4	Diammonium hydrogen phosphet	500	
5	Ammonium hydroxide	500gm	
6	Acetone	2.5 lit.	
7	Aluminium sulphate LR	500gm	
8	Ammonia solution 26%	1.5LIT	
9	Ammonium Oxalate	500gm	
10	Soda lime	250gm	
11	Methanol	2.5 lit.	
12	Sodium nitro prusside	100gm	
13	Silver nitrate LR	50gm	
14	Phthalic anhydride	250gm	
15	Potassium permanganate	50	
16	Ammonium nitrate	500gm	
17	m-dinitrobenzene	250gm	
18	Ceric ammonium nitrate	50gm	
19	Zn dust	50gm	
20	β-naphthol	250kg	
21	Calcium chloride	500gm	
22	Salicylic acid	250gm	
23	Benzoic acid	500gm	
24	p-toludine	250gm	
25	Cinnamic acid	50gm	
26	Chlorobenzene	500ml	
27	Urea	500gm	
28	Aniline	2.5 lit	
29	Thiourea	250gm	
30	Ethyl acetate	1.0 lit	
31	Succinic acid	500gm	
32	Phthalic acid	250gm	
33	Sulphuric acid	2.5 lit	
34	Potassium bromate	500gm	
35	Ferric ammonium sulphate	250gm	
36	Oxalic acid	500gm	
37	Iodine	500gm	

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38	Sodium thio sulphate	500gm	
39	Zinc sulphate	500gm	
40	Barium chloride	250gm	
41	Sodium cobalt nitrate	50 gm	
42	Borax powder	250gm	
43	Manganese dioxide	500gm	
44	Copper pieces	500gm	
45	Potassium iodide	50gm	
46	Di-methyl glycoxime	50gm	
47	Mercury chloride	50gm	
48	Schiff's reagent	250gm	
49	Chloroform	1.5 lit	
50	Calcium carbonate	250gm	
51	Sodium nitrite	500gm	
52	Zinc urinal acetate	100gm	
53	Lead acetate	100gm	
54	Barium nitrate	100gm	
55	KCNS	50	
56	Potassium nitrate	500gm	
57	Sulfanilic acid	100gm	
58	Sodium chloride	500gm	
59	Conc. Sulphuric acid	5 lit	
60	Ethyl alcohol	2.5 lit	
61	Methanol	2.5 lit	
62	Isopropyl alcohol	1.5 lit	
63	Anhydrous sodium carbonate	500gm	
64	Neutralized formaldehyde	1 lit	
65	Chloroform	1.5 lit	
66	Anhydrous Aluminum chloride	500gm	
67	Conc. Hydrochloric acid	5 lit	
68	Conc. Nitric acid	5 lit	
69	Ferrous sulphate	500gm	
70	1,10-Ortho-phenthroline indicator	25gm	
71	phenolphthalein indicator	25gm	
72	Potassium hydroxide	250gm	

B) SHARIR DEPARTMENT

Sr. No.	Name of Chemical	Minimum Requirements
1	Conc. HCl	500ml
2	Benedict's solution	100ml
3	paraffin wax oil	100ml

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ANNEXURE V
NOTARISED AFFIDAVIT TO BE FILLED UP BY
NEWLY APPOINTED TEACHERS

Pass Port Size Photograph (To be attested by Principal)
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Sr. No.	Information of Teacher	To be filled up by Teacher			
1.	Name of the Teacher (Sur Name- First Name- Middle Name)				
2.	Change of Name (if Applicable after marriage)				
3.	Date of Birth (dd / mm / yyyy) (xx/xx/xxxx)				
4.	UG Qualification (University & year)	Year			
		Name of the University			
5.	PG Qualification with subject (University & year) of completion	Subject			
		Year			
		Name of the University			
6.	Ph.D (if applicable)	Subject			
		Year			
		Name of the University			
7.	Post wise details of Experience in chronological order (* Date, Month and Year wise experience should be mentioned)	Duration (dd/mm/yyyy) to (dd/mm/yyyy)	Department (Subject)	Designation	Name of the college
8.	Present working Department (Subject)				
9.	Present Designation				
10.	Nature of present appointment (regular/contractual/deputation)				
11.	Name of present working college				
12.	Permanent Residential Address				
13.	Local Residential Address				
14.	State Board/ Council Registration detail	Registration Number			
		Name of State Board			
15.	Bank detail	Salary Account Number			

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		Name and Branch of Bank	
16.	Contact Number	Mobile Number	
		Residence Number	
		Email ID	

I hereby solemnly affirm that the above information is correct as per my record and knowledge. I further affirm that if any information given in this affidavit is found to be incorrect/ false, I shall be liable to be any disciplinary action.

Date:

Signature of Deponent/ Teacher

I hereby solemnly affirm that the above information is correct as per my record and knowledge. I further affirm that if any information given in this affidavit is found to be incorrect/ false, I have no objection for any disciplinary action against the concerned teacher and myself.

Date:

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GUJARAT AYURVED UNIVERSITY JAMNAGAR

Guidelines/Instructions for Colleges regarding Visitation

1. College may download the updated visitation Proforma (Part I) from website of GAU and may use it to expand the tables wherever necessary. Annexure-III (**MS-excel format**) should be separately downloaded from Gujarat Ayurved University website, duly filled & sent along with the visitation Proforma. Hard copy of visitation Proforma (Part I) is enclosed for ready reference.
2. Any change in the prescribed format will not be accepted by Gujarat Ayurved University.
3. Read the Proforma carefully before filling up.
4. College should keep ready three sets of Visitation Proforma duly signed on each page by the Principal/ Dean/ Director along with all annexure for visitors.
5. A soft copy of the details of teaching staff as per Annexure-II should be submitted along with the visitation report.
6. New teacher appointed after visitation of the college will not be considered/counted in the faculty list of the concerned college.
7. Any data / documents submitted by the college after visitation will not be accepted by the Gujarat Ayurved University.
8. Page-wise Index of all annexure should be provided.
9. Attested copy of UG & PG Certificates, Experience Certificates, Joining Report Relieving letter and Affidavit (As per Annexure-VI) of newly appointed teachers after the last visitation should be attached.
10. Teachers of Govt. colleges/ constituent colleges of University should also submit the affidavit of newly appointed teachers after the last visitation.
11. If false affidavit/ false experience is submitted by any teacher or if teacher is found in duplicity, then legal action will be initiated by the central council against the concerned teacher and Principal of the college.
12. Copy of Form No. 16 issued for purpose of income tax should be submitted in respect of all the teaching staff. (Not admissible for Govt./ constituent colleges of University).
13. Financial information should be filled as per enclosed Proforma.
14. College should make arrangement of videographer and photographer during visitation of Gujarat Ayurved University team for preparing CD and group photographs with Teaching staff and non-teaching staff of College with the visitors separately. The name of each staff member should be mentioned on the bottom of the photograph. It is to be noted that without CD & Photograph, the visitation report will not be accepted by Gujarat Ayurved University.
15. If college has any queries/ doubt/ other information required regarding the visitation Proforma, you are requested to contact telephonically or send an email to the Gujarat Ayurved University on the given mail-ID, i.e. **academic@ayurveduniversity.com**.
16. The filled up visitation Proforma shall be typed and submitted in a separate CD to the visitors.
17. MOU's with government dispensary / hospital and pharmacy to be attached with the Proforma separately.

Signature of Visitors with date

Signature of Principal with date