

**PROFORMA FOR THE INSPECTION REPORT of Pharmacy
ACADEMIC SESSION 200__ - 200__.**

Date of inspection _____ **Place** _____ **Time** _____

[Observation of the expert committee based on the documents furnished and physical verification of facilities.]

1. Name & address of the Institution:

Name : _____

Address : _____

2. The land area available for the institution _____

- Availabilities of clear demarcations of the institution either by a boundary Wall or by a barded wire fencing Yes No
- Whether Land Use Certificate fro educational purposes has been issued by The Competent Authority for the entire land and is in order Yes No
- Availability of all weather approach road to the Institution Yes No
- Suitability of location and surrounding of land for an academic institution Yes No
- Whether the said piece of land is mortgaged to any other agency Yes No
- Availability of master plan for the whole campus indicating boundary of land and building of proposed institution Yes No

03. **Building Plan & Built Up Area**

- Whether Building Plan duly approved by the Competent Authority has been Submitted Yes No
- Whether Building Plan has survey nos. / identification of land on it Yes No
- Whether construction has been carried put as per the approved building plan Yes No

Details of Built Up Area

Quality of constructions (excellent / very good / good / satisfactory / poor) in terms of

- Plastering :
- Painting :
- Flooring :
- Wood Work :

Details of total Built-up Area (Sq.m)

Particulars	Requirement as per AICTE Norms	Available	Shortfall, if any
Instructional Carpet Area			
Administrative Carpet Area			
Circulation and Other Area			
Total			

Note: Circulation and other area include Toilets, Corridors, staircases, common areas etc.
 Details of instructional area (sq. m.):

Particulars	Requirements as per AICTE Norms			Available			Shortfall, if any Area in Sqm.
	Number	Area of each	Total area	Number	Area of each	Total area	
Classrooms							
Tutorial Rooms							
Library							
Lab							
Total							

(a) Total constructed area at present:
 Ground Floor _____ sq.m.+ First Floor _____sq.m. + Second Floor _____ sq.m.
 = **Total** _____sq.m.

(B) Area proposed to be constructed in future :
 Coming next year _____ sq.m.
 Coming next 2 year _____sq.m.

Furniture for professional course :
 Teaching aids (black board & audio visual aids):

Yes	No
Yes	No

Adequacy of Administrative area

- Availability of furnished Principal Offices
- Availability of furnished staff room
- Availability of seprate cabins in staff room for faculty
- Availability of furnished administrative staff office

Yes	No
Yes	No
Yes	No
Yes	No

Details of circulation area and essential amenities - Availability of

- Permanent electrical connections (*)

Yes	No
-----	----
- Electrical generator

Yes	No
-----	----
- Water supply connection(*)

Yes	No
-----	----
- Proper drainage connection (*)

Yes	No
-----	----
- Canteen facility at functional stage

Yes	No
-----	----
- Toilets (boys)

Yes	No
-----	----
- Toilets (girls)

Yes	No
-----	----
- Common room (girls)

Yes	No
-----	----
- Common room (boys)

Yes	No
-----	----
- Hostel facility (#) (girls)

Yes	No
-----	----

 If Yes, capacity
- Hostel facility (#) (boys)

Yes	No
-----	----

 If Yes, capacity

(*) Expert Committee to verify documentary evidence

(#) If no hostel facilities is available, whether arrangements has been made for boarding and loading of students in vicinity of the institution, if yes mode of travels from the place of stay to the institution

4. Information about the Teaching Faculty of the Institution (Furnish detailed information about the teaching faculty of the institution as per enclosed proforma) **(Appendix -1)**

- (a) Total Intake of students at present_____nos.
- (b) Total number of students in the institution_____nos.
- (c) Total number of regular teachers at present_____nos.
- (d) Total number of teachers on Part time basis / visiting faculty basis who are not regular_____nos.
- (e) Total number of teachers at present (c) + (d) _____nos.

- Whether the selection committee for appointment if staff has been conducted. (Kindly check the list of candidates applied, called and appeared for interview and proceedings of the selection committee meeting)

Yes	No
-----	----
- Whether all papers related to advertisement / recruitment / identification of faculty were made available to the expert committee.

Yes	No
-----	----
- If yes, whether they are satisfactory as per norms

Yes	No
-----	----

- Whether faculty is identified and consent for joining institution is Obtained from the entire faculty Yes No
- Whether full time Principal has been appointed Yes No

Shortfall / deficiency as per AICTE / RGPV norms _____

Specific observation of the expert committee _____

5. Information about the supporting staff of the Institution [as per enclosed proforma **(Appendix -2)**

(a) Total Number of Supporting Staff (Technical) in the institution _____ nos.

(b) Total Number of Supporting Staff (Non-Technical) in the institution _____ nos.

Shortfall / deficiency as per AICTE / RGPV norms _____

Specific observation of the expert committee _____

6. Information about Library of the Institution (enclose the list of books)

Particulars	Requirement as per AICTE Norms	Availability	Shortfall, if any
Numbers of titles of books			
Numbers of volumes books			
Numbers of Journals (National + International)			

The future plans for Automation of the library of the institutions:

- Availability of Library facilities for the proposed Institution Yes No
- Whether the Library is fully furnished Yes No
- Whether Photocopier machine is available in the Library Yes No
- Whether the Stacking and Seating Area is adequate Yes No

- Whether full-time librarian has been appointed (if yes)
Qualification _____ Pay Scale _____

Yes	No
-----	----
- Whether the titles of books available are relevant to the syllabus

Yes	No
-----	----
- Availability of vouchers and payment receipts indicating proof

Yes	No
-----	----
- Whether books and journals have been procured, stamped and entered
In the Accession Register (The Expert to kindly affix their signatures on
The last page of accession Register)

Yes	No
-----	----

Shortfall / deficiency as per AICTE / RGPV norms _____

Specific observation of the expert committee _____

7. Information about laboratories required as per the syllabus of RGPV (Name of lab with equipments must be given in table course/department wise) (as per enclosed Proforma **(Appendix – 03)**)

Please verify bills vouchers & payments receipts for the purchase equipment.

- Mention the laboratory not available but otherwise required as per syllabus.

- Availability of Laboratory facilities for the Institution
(if shared, give details _____.)

Exclusive	Shared
-----------	--------

- Whether laboratories possess relevant equipment as per the 1st year syllabus.

Yes	No
-----	----

- Whether equipment procured are at the operational stage

Yes	No
-----	----

- Availability of vouchers and payment receipt indicating proof of purchase

Yes	No
-----	----

- Availability of Stock Register of equipment (The Experts to kindly affix
theirs signature on the last page of Stock Register)

Yes	No
-----	----

Shortfall / deficiency as per AICTE / RGPV norms _____

Specific observation of the expert committee _____

8. Examination results of the students of last four years.
(excellent / very good / good / satisfactory / poor)
9. Information about computer lab and softwares available in the Institution
Computer facilities

S.No.	Particulars	Requirements as per AICTE Norms	Availability	Shortfall, If any
1	Number of Computer Terminals (terminal-students ratio)			
2	Hardware Specification			
3	Number of terminals on LAN/WAN			
4	Relevant legal Software's			
5	Peripheral (s)			

Whether the Computer facilities for the proposed Institution are being Shared with other institution, if so give details:

- Availabilities of vouchers and payment receipt indicating proof of purchase Yes No
- Whether entries have been made in the stock register (The Expert to kindly affix their Signature on the last page of Stock Register) Yes No
- Whether the computer centre is fully furnished. Yes No
- Brand of computers & printers Assembled Branded (Name of brand) :

(All computers should be in operational stage / switched on at the time of inspection).

Shortfall / deficiency as per AICTE / RGPV norms _____

Specific observation of the expert committee _____

10. Additional Facilities:

- Principal 's Quarter's Yes No
- Quarter's for faculty Yes No
- Guesthouse Yes No
- Parking facility Yes No
- Digital library Yes No

- Medical facilities (part time medical officer) Yes No
- Insurance facilities (Medi-claim + Accident Insurance) Yes No
- Provision for Bank / Extension counter Yes No
- Provision for Post office Yes No
- Provision for Telephone Booth Yes No
- Gymnasium / Indoor / Outdoor stadium Yes No
- Sports facilities Yes No
- Whether rainwater-harvesting facility has been provided in the institution. Yes No
- Canteen facility Yes No
- Girl's common room Yes No

11. A brief note about policies and plans of the management for faculty and staff development.

12. Status of Compliance of Specific Conditions of Last Approval/Extension of Approval by AICTE/RGPV/DTE.

S.No.	Specific Condition	Compliance Status

13. Specification observations of the Expert Committee on the following parameters:

Parameters	Comments
Adequacy & suitability of Built-up space	
Furniture / Teaching Aids for the professional course	
Computer facilities	
Laboratories & Workshop	
Faculty	
Library	
Additional faculties	

14. List of members of the society/trust who interacted with The visiting expert committee

S.No.	Name of Members	Designation in the Society/Trust/Institution	Signature
1.			
2.			
3.			
4.			
5.			

Major Strengths & Weaknesses of the institution observed by the Expert Committee

Strengths

- 1.
- 2.
- 3.

Weaknesses

- 1.
- 2.
- 3.

Any other observation / Comments of the Expert Committee on suitability of the Institution

RECOMMENDATIONS OF THE EXPERT COMMITTEE:

Recommended

S.No.	Course (s)	Intake	Period of Affiliation
1			
2			

Not Recommended

Reasons for Not Recommending:

Name and Signature of the Expert Committee Members

Signature :
Name :
Designation & Address :
(Chairman)

Signature :
Name :
Designation & Address :
(Member)

Signature :
Name :
Designation & Address :
(Member)

Signature :
Name :
Designation & Address :
(Member)

APPENDIX – 01

Name and address of the Institution: _____

Information Regarding Teaching Faculty of this institution

S.No.	Name of Dept. to which attached	Name of Teacher	Designation of the Teacher	Qualification. Ph.D/M.Pharma/B.Pharma	Branch / Subject	% Marks obtained	Regular/ Contract/ PT/Visiting	Date of joining the institute	Salary given		
									Basic	DA	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)

Signature of Principal
with date
and seal of the Institute

APPENDIX – 02

Name and address of the Institution: _____

Information Regarding Supporting Staff (Technical) of the Institutions

S. No	Name of Laboratory/ Workshop/ Computer Centre etc. to which attached	Name	Designation	Qualification	Regular/ Contract	Date of joining	Salary given		
							Basic	DA	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)

Signature of Principal
with date
and seal of the Institute

APPENDIX – 03

Information Regarding Laboratories

Name of Laboratories & Department to which attached	Equipments / Machines available in the Laboratories

Signature of Principal
with date
and seal of the Institute

Undertaking (I)

To be Prepared on 100/- Rs. Stamp Notarized and Submitted at the time of Inspection

I----- Director/Principal/Secretary of -----, (College) hereby undertake the followings details related with the Institutions _____

1. The Land----- will be used as per the Master Plan for the purpose mentioned in the plan.
2. The Building with built up area of ----- constructed for Degree /Post Graduate ----- course only and will be exclusively used for this purpose alone.
3. The Institute has recruited qualified staff as per the norms for the proper functioning and maintenance of the Institution for Degree/Post Graduate ----- -- in ----- and it will not be shared with other institution.
4. The Institute has purchased ----- books with----- titles and ----- Journals and other such requirements for library for the Degree/Post Graduate ----- course and will be used only by the students and faculty members of the ----- College name.
5. ----- number of computers have also been made available in the computer room and these computers will be used only by the students and faculty members of ----- College name
6. All laboratories/workshop are provided and fully established for various courses/discipline by providing space, furniture, equipments /Instruments experimental setups and licensed software as per AICTE norms.
7. The following faculty members and Principal have been exclusively recruited for the proposed ----- only and no impersonisation of faculty has taken place.

S.No	Name of faculty	Designation/Qualification	Department	Date of Appointment

8. I under take that if any one or all of the undertakings as mentioned above are not fulfilled/complied or if found to be false. It will disentitle the Institution from grant of affiliation by RGPV, Bhopal, (M.P.) for the conduct of the above course(s) for the academic year 2010-2011.

Director/Principal/ Secretary