

# NATIONAL BOARD OF ACCREDITATION

## Pro-forma for Pre-Qualifiers for Undergraduate Pharmacy Programs

### PARTA- Profile of the Institute

**A1. Name of the College:-**

**Year of Establishment:-**

Location of the College:-

**A2. Address:-**

**City:-**

State:-

Pin Code:-

Website:-

E-mail:-

STD Code:-

Phone No:-

Fax STD Code:-

Fax:-

**A3. Head of the Institution:-**

Name:-

Designation:-

Status of Appointment:-

**A4. Contact details of Head of the Institution:-**

STD Code:-

Telephone No:-

Mobile:-

E-mail:-

Fax STD Code:-

Fax No:-

**A5. Name of the Affiliating University:-**

Address:-

City:-

State:-

Pin Code:-

Website:-

E-mail:-

STD Code:-

Phone No:-

Fax STD Code:-

Fax:-

**A6. Type of the Institution:**

University

Deemed University

Autonomous  Any other (Please Specify)   
 Affiliated

**A7. Ownership Status:**

Central Government  State Government   
 Grant-in-Aid  Self financing   
 Trust  Society   
 Section 25 Company  Any Other (Please specify)

**Provide Details:**

**A8. Students Admissions (Institute level considering all programs):**

Item	CAY	CAYm1	CAYm2	Total
Sanctioned intake				
Number of students admitted				
% of Students Admitted over last three assessment years ( Total Admitted/Sanctioned Intake )				

**Table A8**

CAY: Current Academic Year

CAYm1: Current Academic Year minus 1=Current Assessment Year

CAYm2: Current Academic Year minus 2=Current Assessment Year minus 1

**A9. Campus Information:-**

**Does the College have its own building:-**

**Sports Complex:-**

**Canteen and Hostel (If any):-**

**Medical Room:-**

**Computer Laboratories:-**

**Counselling and guidance:-**

**Placement:-**

**A10. Names of programs offered by the College:-**

**UG:-**

**PG:-**

Note: - Please mention department wise.

**A11. Programs to be considered for Accreditation vide this application.**

S. No.	Program Name

**Table A11**

## **PART B- Program information as per point A11**

(To be filled separately for all the programs applied for)

### **B1. Provide separate Information for each program applied for:-**

<b>Sr. No.</b>	<b>Name of the program to be considered</b>	<b>Year of Start</b>	<b>Initial Intake</b>	<b>Increase/decrease in intake, if any</b> (mention the no. of seats increased/decreased, also)	<b>Year of increase</b>	<b>AICTE Approval Letter No.</b>	<b>Accreditation Status*</b>

**Table B1**

#### **\* Write applicable one:**

- Applying first time
- Granted provisional accreditation for two years for the period(specify period)
- Granted accreditation for 5 years for the period (specify period)
- Not accredited (specify visit dates, year)
- Withdrawn (specify visit dates, year)
- Not eligible for accreditation
- Eligible but not applied

### **B2. Student Admissions (Program specific):-**

<b>Item</b>	<b>CAY</b>	<b>CAYm1</b>	<b>CAYm2</b>	<b>Total</b>
Sanctioned intake				
Number of students admitted				
% of Students Admitted over last three assessment years ( Total Admitted/Sanctioned Intake )				

**Table B2**

**CAY: Current Academic Year**

**CAYm1: Current Academic Year minus 1=Current Assessment Year**

**CAYm2: Current Academic Year minus 2=Current Assessment Year minus 1**

### B3. Information of Faculty

Please provide the list of faculty in the department as per the below format since CAYm3 (2013-14), please provide separate list for each year till CAY

S. No.	Name	PAN No.	Qualification	Designation	Date of Joining	Currently Associated (Y/N)	Nature of Association (Regular/Contract/Adjunct)	Date of Leaving (In case Currently Associated is "No")
1.								
..								
N.								

Table B3

#### B3.1.

S. No.	Designation/Numbers	Number of Faculty for the program applied*	
		CAY	CAYm1
1.	Professor		
2.	Associate Professor		
3.	Assistant Professor		
4.	Number of Ph.D.		

Table B3.1

- Atleast one Professor or Associate professor should be available exclusively for the program under consideration

#### B3.2. Detail of Head of the Department for the program under consideration:

Name:-

Qualification:-

Ph.D

Others

**B.4. Student Faculty Ratio (to be calculated as per the Department):-**

*(No of Faculty as per the sanctioned intake)*

No. of UG Programs in the Department (n): \_\_\_\_\_

No. of PG Programs in the Department (m): \_\_\_\_\_

No. of Students in UG 1<sup>st</sup> Year= **u1**

No. of Students in UG 2<sup>nd</sup> Year= **u2**

No. of Students in UG 3<sup>rd</sup> Year= **u3**

No. of Students in PG 1<sup>st</sup> Year= **p1**

No. of Students in PG 2<sup>nd</sup> Year= **p2**

**No. of Students = Sanctioned Intake + Actual admitted lateral entry**

*(The above data to be provided considering all the UG and PG programs of the department)*

**S**=Number of Students in the Department = UG1 + UG2 +UG3 + PG1 + PG2

**F** = Total Number of Regular Faculty Members in the Department

**Student Faculty Ratio (SFR) = S/F**

Year	CAY	CAYm1	CAYm2
u1.1			
u1.2			
u1.3			
UG1	<b>u1.1+u1.2+u1.3</b>	<b>u1.1+u1.2+u1.3</b>	<b>u1.1+u1.2+u1.3</b>
...			
u <sub>n</sub> .1			
u <sub>n</sub> .2			
u <sub>n</sub> .3			
UG <sub>n</sub>	<b>u<sub>n</sub>.1+u<sub>n</sub>.2+u<sub>n</sub>.3</b>	<b>u<sub>n</sub>.1+u<sub>n</sub>.2+u<sub>n</sub>.3</b>	<b>u<sub>n</sub>.1+u<sub>n</sub>.2+u<sub>n</sub>.3</b>
p1.1			
p1.2			
PG1	<b>p1.1+p1.2</b>	<b>p1.1+p1.2</b>	<b>p1.1+p1.2</b>
....			
pm.1			
pm.2			
PG <sub>m</sub>	<b>pm.1+pm.2</b>	<b>pm.1+pm.2</b>	<b>pm.1+pm.2</b>
Total No. of Students in the Department ( <b>S</b> )	<b>UG1 + UG2 +... +UG<sub>n</sub> + PG1 + ...PG<sub>m</sub>=S1</b>	<b>UG1 + UG2 + .. +UG<sub>n</sub> + PG1+... + PG<sub>m</sub>=S2</b>	<b>UG1 + UG2 + .. +UG<sub>n</sub> + PG1+... + PG<sub>m</sub>=S3</b>
No. of Faculty in the Department ( <b>F</b> )	<b>F1</b>	<b>F2</b>	<b>F3</b>
Student Faculty Ratio (SFR)	<b>SFR1=S1/F1</b>	<b>SFR2= S2/F2</b>	<b>SFR3= S3/F3</b>
Average SFR	<b>SFR=(SFR1+SFR2+SFR3)/3</b>		

**Table B3.3**

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**Note:**

1. 75% should be Regular/ full time faculty and the remaining shall be Contractual Faculty/Adjunct Faculty/Resource persons from industry as per AICTE norms and standards.
2. The contractual faculty will be considered for assessment only if a faculty is drawing a salary as prescribed by the concerned State Government for the contractual faculty in the respective and who have taught over consecutive 4 semesters.

**B5. Placement Ratio**

Year	N=No. of Students admitted in 1st year	Z=(No. of students Placed + selected for higher studies + opted Entrepreneurship)	Placement Ratio (Z/N)
CAYm1			
CAYm2			
CAYm3			
<b>Average Placement Ratio</b>			

**Table B5****B6. Faculty Cadre Proportion:-**

(The reference Faculty cadre proportion is 1:2:6 i.e.; Professor: Associate professor: Assistant professor)

Year	Professors		Associate Professors		Assistant Professors	
	Required F1	Available	Required F2	Available	Required F3	Available
CAY						
CAYm1						
CAYm2						
<b>Average Numbers</b>	RF1=	AF1=	RF2=	AF2=	RF3=	AF3=

**Table B6**

## Compliance status to Pre-Visit Qualifiers

S.N.	Pre Visit Qualifiers	Current Status	Compliance Status (Complied/Not Complied)
<b>Essential Qualifiers</b>			
1	<b>Vision, Mission &amp; PEOs</b> i. Are the Vision & Mission stated in the Prospectus / Website? ii. Are the PEOs of the Program listed in the Prospectus / Website?		
2	Whether approval of AICTE for the programs under consideration has been obtained for all the years including current year		
3	Whether admissions in the undergraduate programs under consideration has been more than or equal to 50% ** for previous three academic years including current academic year.	% Admission	
4	Whether student faculty ratio in the programs under consideration is better than or equal to 1:20 averaged for previous three academic years including current academic year.	SFR	
5	Whether at least one Professor or one Associate Professor available in the respective Department during previous two academic years including current academic year.		
6	Whether the placement ratio(Placement + higher studies) is greater than 40% (average of the last three assessment years)		
7	Whether two batches have passed out in the programs under consideration		
8	Whether HODs possess Ph.D. degrees		
9	Whether number of available faculty with Ph.D. in the department is greater than or equal 20% of the required number of faculty for previous two academic years including current academic year.		
<b>Desirable Parameters</b>			



1	<b>Whether department has program assessment and quality improvement committee. If so, its constitution and mandate.</b>		
2	<b>Whether the departments under consideration receives separately earmarked funds for</b> <b>i. Maintenance of Laboratory/computational facilities(recurring funds)</b> <b>ii. Up-gradation of laboratory/computation facilities(non-recurring funds)</b>		
3	<b>Whether admissions in the undergraduate programs under consideration has been more than 60% (average of the last three assessment years)</b>		

\*Total number of students admitted in first year minus number of students migrated to other institutions, plus the number of students migrated to this institution divided by the sanctioned intake.

\*\*Total number of students admitted in first year in the respective program minus number of students migrated to other programs/ institutions plus the number of students migrated to this program divided by the sanctioned intake in the respective program.

**Decision: If compliance status in all the cases is yes, then the institute shall be treated as eligible for furnishing the e-SAR of the programs which may be considered for accreditation as per procedure.**