Proforma for submission of proposal under the scheme

**FACULTY DEVELOPMENT PROGRAMME**

A Faculty Development Programme (FDP) is designed to

* enhance their teaching and other skills
* make them aware about modern teaching tools and methodologies
* acquire knowledge about current technological developments in relevant fields.
* impart professional practices relevant to technical education
* achieve competitive teaching and learning environment and
* channelize development with respect to academic qualifications and personal matters

Through each SDP, 15-20 faculty members of Science and Engineering colleges and Polytechnics are trained for a duration of 2-3 weeks.

|  |  |
| --- | --- |
| **Name of the Institute** |  |
| **Address** |  |
| **Contact details** | Email | FAX | Telephone |
| **Permanent Id of the Institute** | This Id is available on AICTE web portal |
| **Application Id** | Unique application Id as assigned to your application on web portal. See important note on the last page of this proforma. |

**Technical Field of proposal**

|  |
| --- |
|  |

**Title of proposal**

|  |
| --- |
|  |

Add rows as required

**Abstract**

|  |
| --- |
|  |

Add rows as required

**Objective**

|  |
| --- |
|  |

Add rows as required

**Project Impact -Expected outcome**

|  |
| --- |
| New experiments/Demonstration of new technology/other |

**Level of activity (Regional / National / International ) and target audience**

|  |
| --- |
|  |

Add rows as required

**Programme details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Time | Activity | Venue | Infrastructural requirements and availability  |
|  |  | Lecture by / Demonstration / Industry visit / Poster presentation/ other |  |  |

Add rows as required

**Eminent personalities expected to participate**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Designation | Organization | Activity |
|  |  |  | Keynote address / Chairing sessions / Speaker / Advisors / Reviewers / Sponsorer |

Add rows as required

**Profile of collaborating/participating Industry/s or professional body or other orginisation/s, if any.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Address | Website | Contact person , designation, email | Role$ in collaborating/participating | Financial commitment# in Rs. |
|  |  |  |  |  |  |
| Total Rs.  |  |

$Mention role of Industry/orgnisation.

Add rows as required..

#Attach copy of letters received from participating industry showing intent / financial commitment etc.

**Similar event organized by the Institute earlier, if any.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title of the activity | Subject | Date from- to(Latest first) | Level( Regional / National / International ) | Name of by external body involved, if any | Grant by AICTE, Rs. |
|  |  |  |  |  |  |

Add rows as required..

|  |  |  |
| --- | --- | --- |
| **Budget Estimates**  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Head of expenditure | Anticipated expenditure | Budget by parent orgnisation | External Sponsorships | Assistance requested from Council (R)  |
| Stationery, printing, Pre-event expenditure etc. |  |  |  |  |
| Travel, Stay and DA |  |  |  |  |
| Other |  |  |  |  |
| **Total** |  |  |  |  |

Add rows as required.

Max assistance 7 Lakhs

|  |  |  |
| --- | --- | --- |
| **Payment disbursement schedule** |  |  |

|  |  |  |
| --- | --- | --- |
| Advance disbursement | Installment on completion of project | Total (Max 7 Lakhs) |
| R1=R/2 | R2=R/2 | R=R1+R2 |
|  |  |  |

**Details of Project Coordinator**

|  |  |
| --- | --- |
| Name |  |
| Exact designation |  | Date of joining |  |
| Appointment Type |  | Scale of Appointment |  |
| Department |  |
| Qualifications | UG | PG | PhD |
| Experience in years | Teaching | Industry | Research |
| Relevant experience  | Attach separately as needed |
| Other information | Give any other information that will help in accepting /funding this project |
| Cell number |  |
| Email |  |
| Signature |  |

|  |  |
| --- | --- |
| **Details of earlier grants awarded to the Institute** | (Give details of grants received in last three years) |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Scheme | Name of the coordinator | Amt sanctioned | Sanctioned letter details  | Funds Utilisation position as on today | Utilisation Certificate details/ Reason for non- submission of Utilisation Certificate |
| NR | R |
|  |  |  |  |  |  |  |

Add rows as required

By signing this certificate, I/We undertake to

|  |  |
| --- | --- |
|  🗹 | Abide by all the rules / regulations regarding utilization of amount that may be granted to the Institute. |
|  🗹 | Submit timely progress reports about grant utilization. |
|  🗹 | Submit utilization certificate duly authenticated by CA on/before project period is over. |
|  🗹 | Return full/partial unutilized grant amount to the Council. |

|  |  |
| --- | --- |
| **Project forwarded to AICTE** | Signature of Head of the Institution |
| **Date :** | Institute Seal |

**Important :** You need to apply on web portal using your Institute login and password. Select tab “AQIS application”. Press “New” to create new application. Your application is assigned **unique application Id**. Fill all the details over there. **Prepare application in this proforma also**. Attach PDF of it to the application on web portal. Now press “submit” on web portal to submit application. Pay processing fees on web portal using appropriate payment option.