



All India Council for Technical Education

(A Statutory Body of Government of India)

Nelson Mandela Marg, Vasant Kunj, New Delhi - 110070

Website: www.aicte-india.org

Proforma for submission of proposal under the scheme

E- Shodh Sindhu, INFLIBNET

1.1	Details of Institute		
(a)	Name of the Institute		
(b)	Address		
(c)	Contact details	Email	FAX Telephone
(d)	Permanent Id of the Institute		
(e)	Year of Establishment of the Institute		
(d)	Whether Govt./ Govt. Aided Institute		

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Code	

1.2		Other Details	
	(a)	Internet Bandwidth(in Mbps)	
	(b)	Wi-Fi Bandwidth (in Mbps)	
	(c)	Reference of Extension of Approval letter for the current year	Letter No: Date:
	(d)	Does the Institute have a PG course?(if yes, give details)	

1.3		Details of the Chief Coordinator	
	(a)	Name of the Chief Coordinator	
	(b)	Department	
	(c)	Contact details	Cell No. Email ID

1.4	Requirement of E- Resources (Please put tick marks)	<input type="checkbox"/> IEEE ASPP <input type="checkbox"/> ASCE <input type="checkbox"/> ASME <input type="checkbox"/> Pharma <input type="checkbox"/> Others
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1.5 Credential of Institution / Department							
	Parameter/ Criteria	Input by Institute	Input by Institute on specialization	Max. Marks	Allocating Marks	Marks Awarded	Marks Awarded by the Experts
(a)	Type of Institute (Whether TEQIP-I, II or III)			5	TEQIP I / TEQIP II/ TEQIP III		
(b)	Standing of the Organization for more than 5 years (Yes/No)			10	Upto 5 yrs =3 marks 5-15 yrs = 5 marks Above 15 yrs = 10 marks		
(c)	Academic autonomy (Yes/No)			10	Yes = 10marks No = 0 marks		
(d)	Number of Programs the Institute have at UG level			10	Less than 5 = 3 marks 5 – 10 = 5 marks Above 10 = 10 marks		
(e)	Number of Programs a PG level			15	1-5 = 5marks 6-10= 10marks Above 10 = 15 marks		
(f)	Number of PhD qualified Faculty			10	For every 3 Ph.D faculty = 2 marks (Max. 10 marks)		
(g)	Number of Professors in the Institute			10	For every 3 Profs = 2 marks (Max. 10 marks)		
(h)	Research projects completed in last 3 years			10	Upto 5 = 5 marks Above 5 = 10 marks		
(i)	Consultancy projects completed in last 3 years			10	1-10 = 3 marks 10-20=5 marks 20-50=10 marks		
(j)	Number of courses accredited in the Institute			10	Min 3=3marks More than 3 = 5 marks More than 5 = 10 marks		
			Sub Total	100			

1.6	List of Enclosure	Please tick
	(a) AICTE's Approval Letter for 2017-18	
	(b) NBA Accredited Approval Letter	
	(c) Details of number of publications in last three years	
	(d) TEQIP Documents	
	(e) Details of Ph.D qualified Faculty	
	(f) Details of consultancy project completed in last 3 years	
	(g) Details of research project completed in last 3 years	
	(h) Details of professors in the institute	

Declaration:-

I/We undertake to:-

- (i) The details submitted are true to the best of my knowledge.
- (ii) Abide by all the rules / regulations regarding utilization of e-resources that may be granted to the Institute.
- (iii) Submit timely progress report about the utilization of e-resources.
- (iv) The Institute applying for the grant should not have been benefitted of the same scheme in any form from MHRD or any other Government sources

**Place:
Institute**

Name & Signature of Head of the

Date:

Institute Seal

2	Mandate Form (For Institutes / Colleges)
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2.1	Institute Details	
(a)	Name of the Institute	
(b)	Institute Permanent ID No	
(c)	Head of the Institute (Director/Registrar/ Principal)	
(d)	Type of Institution (Govt./Self Finance/Private)	
(e)	Address of Institute	
		PIN
(f)	PAN of the Institute (enclosed the copy)	
(g)	Telephone No. of the Head of the Institute	
(h)	E-Mail id of the Head of the Institute	
(i)	Name of Bank where RTGS amount is to be sent	
(j)	Branch Name	
(k)	Address of the Bank	
		PIN
(l)	Telephone No. of the Bank	
(m)	Name of the A/c holder (Principal/Director/Registr ar with Designation)	
(n)	Account Type (Savings Bank/Current Account)	
(o)	Account Number (Full)	
(p)	Banker's IFSC Code	

It is declared that all information we have provided are true in all respect.

**Signature of Account holder
Or authorized Signatory with Seal**

Banker's Signature and Seal

**Date :
Place :**

**Note: (1) All Data needs to be filled mandatorily for facilitating RTGS transfer of the amount against Institute name.
(2) Name of Institute and Name of Account holder should be same for remitting RTGS.**