



APPROVAL PROCESS 2020-21

Application Deficiency Report

DEFICIENCY REPORT AS PER APPLIED INTAKE (Applicable for Existing Institutions only)

| | | | |
|--------------------------------|---|---|--|
| Regional Office | South-West | Overall Deficiency of Institution: | No |
| Application ID | 1-7007410697 | Permanent ID | 1-15068805 |
| Name of the Institution | Padmashree Institute Of Management And Sciences | Address | #149, Padmashree Campus, Kommagatta, Sulikere, Kengeri, Bangalore-60, India, |
| City/Village | Bangalore | District | Bangalore Urban |
| State | Karnataka | PIN | 560060 |

Director/Principal Details

| Designation | Name | Appointment Type | Qualification | PhD | Qualified as per AICTE Norms (YES/NO) |
|--------------------|------------------------------|------------------|----------------------------|-----|---------------------------------------|
| Director/Principal | Yagamurthy Reddy Kotheppalle | Regular | BCOM, MBA, MCOM, MED, PGDM | Yes | Yes |

Other Details

| Sr. No. | Particulars | Status Provided by the Institution | Deficiency |
|---------|---|------------------------------------|------------|
| 1. | List of Faculty Member and Data Uploaded on the Institution Web Portal | Yes | No |
| 2. | Are all Approved Teaching Faculty Member being Paid as per Present Pay Scale/Commission? | Yes | No |
| 3. | Whether Institution is Operating from Permanent Site? | Yes | No |
| 4. | Fees to be Charged, Reservation Policy, Admission Policy and Document Retention Policy are Uploaded in Institution's Website? | Yes | No |
| 5. | Courses/Approved Intake Displayed at the Entrance of the Institution? | Yes | No |

Anti-Ragging Related Deficiency Status

| Sr. No. | Particulars | Status Provided by the Institution | Deficiency |
|---------|---|------------------------------------|------------|
| 1. | Constitution of Anti-Ragging Committee | Yes | No |
| 2. | Constitution of Anti-Ragging Squad | Yes | No |
| 3. | Undertaking Obtained from all Students | Yes | No |
| 4. | Appointment of Counselors | Yes | No |
| 5. | Undertaking Obtained from Parents of all the Students | Yes | No |
| 6. | Undertaking Obtained from Students Staying in Hostel | Yes | No |
| 7. | Undertaking Obtained from Parents of Students Staying in Hostel | Yes | No |

Ombudsman Related Deficiency Status

| Sr. No. | Particulars | Status Provided by the Institution | Deficiency |
|---------|---------------------|------------------------------------|------------|
| 1. | Grievance Committee | Yes | No |

Institution Level Faculty Member

| Sr. No. | Particulars | Actual No. | Required No. as per CI | Deficiency |
|---------|-------------|------------|------------------------|------------|
|---------|-------------|------------|------------------------|------------|

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal

Application Deficiency Report



Application Status: **Not Submitted**
Application Sub-Status:

Report Generated on :-29/02/2020

| | | | | |
|----|------------------------------|----|----|----|
| 1. | Total Faculty(UG+PG+Diploma) | 13 | 12 | No |
|----|------------------------------|----|----|----|

Administrative Area

| Sr. No. | Particulars | Actual Room Area (Sq.m.) | Expected Room Area (Sq.m.) | Deficiency |
|---------|---|--------------------------|----------------------------|------------|
| 1. | Board Room | 20 | 20 | No |
| 2. | Department Offices/Cabin for Head of Dept | 30 | 20 | No |
| 3. | Central Store | 30 | 30 | No |
| 4. | Exam Control Office | 30 | 30 | No |
| 5. | Housekeeping | 10 | 10 | No |
| 6. | Maintenance | 10 | 10 | No |
| 7. | Office All Inclusive | 150 | 150 | No |
| 8. | Placement Office | 50 | 30 | No |
| 9. | Principal Directors Office | 39 | 30 | No |
| 10. | Security | 10 | 10 | No |
| TOTAL | | 379.00 | 340.00 | |

Amenities Area

| Sr. No. | Particulars | Actual Room Area (Sq. m.) | Expected Room Area (Sq. m.) | Deficiency |
|---------|-------------------------|---------------------------|-----------------------------|------------|
| 1. | Boys Common Room | 75 | 75 | No |
| 2. | Cafeteria | 150 | 150 | No |
| 3. | First aid cum Sick Room | 10 | 10 | No |
| 4. | Girls Common Room | 75 | 75 | No |
| 5. | Stationery Store | 10 | 10 | No |
| TOTAL | | 320.00 | 320.00 | |

Computational Facilities

| Sr. No. | Particulars | Available | Required | Deficiency |
|---------|------------------------|-----------|----------|------------|
| 1. | Internet Bandwidth | 32 | 32 | No |
| 2. | Printers | 6 | 2 | No |
| 3. | A1 size Color Printers | 0 | 0 | No |
| 4. | Legal Application S/W | 10 | 10 | No |
| 5. | Legal System S/W | 1 | 1 | No |
| 6. | PCs to Student ratio | 120 | 40 | No |

Library Facilities

| Sr. No. | Particulars | Available | Required | Deficiency |
|---------|-------------------------------|-----------|----------|------------|
| 1. | Volumes | 10500 | 7500 | No |
| 2. | Titles | 1050 | 750 | No |
| 3. | Journals | 51 | 12 | No |
| 4. | Library Management Software | 1 | 1 | No |
| 5. | Reading Room Seating Capacity | 80 | 60 | No |
| 6. | MultiMediaPC | 10 | 10 | No |
| | | | 2 | |

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal

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| Instructional Area-Common Facilities | | | | |
|---|------------------------|-----------|----------|------------|
| Sr. No. | Particulars | Available | Required | Deficiency |
| 1. | Computer Center | 155 | 150 | No |
| 2. | Library & Reading Room | 195 | 100 | No |
| TOTAL | | 350.00 | 250.00 | |

| Land Area Details | | | | |
|--------------------------|--------------------------|-----------|----------|------------|
| Sr. No. | Particulars | Available | Required | Deficiency |
| 1. | Total Area of Land | 1 | 1 | No |
| 2. | Maximum number of Pieces | 1 | 1 | No |

| Existing Programme / MANAGEMENT | | | | | |
|--|---------------|-------|------------------------|--------------------------|------------|
| Sr. No. | Particulars | Level | Actual Room Area (Sqm) | Expected Room Area (Sqm) | Deficiency |
| 1. | Classroom | PG | 600 | 264 | No |
| 2. | Tutorial Room | PG | 40 | 33 | No |
| 3. | Seminar Hall | UG/PG | 264 | 132 | No |
| TOTAL | | | 904.00 | 429.00 | |

| Other Facilities | | | |
|-------------------------|--|--------------|------------|
| Sr. No. | Particulars | Availability | Deficiency |
| 1. | All Weather Approach(Motorised Road) | Yes | No |
| 2. | Safety Provisions | Yes | No |
| 3. | Sewage Disposal System | Yes | No |
| 4. | Telephone | Yes | No |
| 5. | Vehicle Parking | Yes | No |
| 6. | First Aid | Yes | No |
| 7. | Appointment: Student Counselor | Yes | No |
| 8. | Establishment: Anti-Ragging Committee | Yes | No |
| 9. | Establishment: Committee for SC/ST | Yes | No |
| 10. | Establishment: Internal Complaint Committee(ICC) | Yes | No |
| 11. | Estb: Grievance Redressal Committee/OMBUDSMAN | Yes | No |
| 12. | Barrier free Environment | Yes | No |
| 13. | AICTE Approval Letters- EoA/LoA | Yes | No |
| 14. | Institution-Industry Cell | Yes | No |
| 15. | Digital Payment-Financial Transactions | Yes | No |
| 16. | Food Safety and Standards | Yes | No |
| 17. | Insurance for Students | Yes | No |
| 18. | Applied membership-National Digital Library | Yes | No |
| 19. | Online Grievance Redressal Mechanism | Yes | No |
| 20. | Internal Quality Assurance Cell | Yes | No |
| 21. | Fire and Safety Certificate | Yes | No |
| 22. | Atleast 5 MoUs with industries | Yes | No |

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal

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| | | | |
|-----|---|-----|----|
| 23. | Display of info submitted to AICTE on website | Yes | No |
| 24. | General Insurance | Yes | No |
| 25. | Backup Electric Supply | Yes | No |
| 26. | Group accident policy for employees | Yes | No |
| 27. | Rain Water Harvesting | Yes | No |
| 28. | Implementation of student Induction Programme | Yes | No |
| 29. | Waste Management and a sustainable Green Campus | Yes | No |
| 30. | Institution Web Site | Yes | No |
| 31. | Medical & Counseling | Yes | No |
| 32. | Notice Boards | Yes | No |
| 33. | Potable Water Supply | Yes | No |

Provisional

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal

Application Deficiency Report



Application Status: **Not Submitted**
Application Sub-Status:

Report Generated on :-29/02/2020

DECLARATION BY THE PRINCIPAL/DIRECTOR/REGISTRAR OF THE INSTITUTION DEPARTMENT

I, as the Head of the Institution, hereby declare that:

- a) I have carefully gone through the AICTE Regulations Notification dated on 30th November, 2016, published in the Gazette of India Extraordinary Part III, Section- 4 and its amendment 05th December 2017 also the various provisions mentioned in the Approval Process Hand Book 2020-21.
- b) I am fully aware of the data uploaded by me in respect of my institution on the web portal.
- c) I am aware that there is no provision for correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.
- d) I am also aware that application for seeking Extension of Approval(EoA), Increase/Reduction of intake, Addition of new courses, Change of site, Closure of course, Supernumerary Seats under PIO/FN/Gulf quota Approval status/OCI, NRI, Change of name, and Conversion of women institution into Co-ed institution and vice versa (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2020-21.
- e) I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institution on the portal.
- f) I am also aware that Institute is eligible for grant of Extension of Approval to the Existing Institutions, Extended EoA(if Applicable as per APH 2020-21), only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2020-21.

Signature of Director/Registrar/ Principal

Name :

Seal/Stamp of the University /Institution Department

Date of Signature(dd/mm/yyyy)

Seal of Institution

Name & Signature of Director/Principal