



All India Council for Technical Education

(A Statutory body under Ministry of HRD, Govt. of India)

7th Floor, Chandralok Building, Janpath, New Delhi- 110 001
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DEFICIENCY REPORT AS PER CURRENT INTAKE (Applicable for existing institutes only)

Regional office	Western
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Application Id	1-1469110132
Name of the Institute	VISHWAKARMA SAHJEEVAN INSTITUTE OF MANAGEMENT
Address	AT POST TALUKA KHED , DISTRICT RATNAGIRI.
City/Village	RATNAGIRI
District	RATNAGIRI
State	Maharashtra
Pin	415709

	Name	Qualification	Appointment type	PhD
Principal	SUNIL DOKE	B.SC., M.B.A., M.PHIL	Regular	Yes

Overall Deficiency of Institute:	N
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Other Details

Details of Requirement	Status provided by the Institute	Deficiency
List of faculty and data uploaded on the institute web portal	Y	No
Are all approved teaching faculty being paid as per VI pay commission?	Y	No
Whether Institute is operating from Permanent Site/ Temporary Site?	Permanent Site	No
Fees to be charged, Reservation policy,	Y	No

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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Admission policy and Document retention policy are uploaded in Institute's Website?		
Courses/Approved Intake displayed at the entrance of the institute?	Y	No

Anti-Ragging Related Deficiency Status

Details of Requirement	Status provided by the Institute	Deficiency
Constitution of Anti-Ragging Committee	Yes	No
Constitution of Anti-Ragging Squad	Yes	No
Affidavit obtained from all Students	Yes	No
Appointment of Counselors	Yes	No
Affidavit obtained from parents of all the students	Yes	No
Affidavit obtained from students staying in Hostel:	No Hostel	No
Affidavit obtained from parents of students staying in Hostel	No Hostel	No

Ombudsman Related Deficiency Status

Details of Requirement	Status provided by the Institute	Deficiency
Grievance Committee	Yes	No

Total Number of Students in Institute

No of Students UG	0
No of Students PG	120
No of Students DIPLOMA	0
Total Students (CI) (UG+PG+DIPLOMA)	120

Institute Level Faculty

	Actual number	Required number as per CI	Deficiency
Total Faculty (UG+PG+DIPLOMA)	8	8	No

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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Program Level Faculty

Sr.Number	Course Unique Id	Program	Course	Level	Course Duration	Full Time / Part Time	Approved Intake (12-13)	Approved Intake (11-12)	Approved Intake (10-11)	Approved Intake (09-10)	Approved Intake (08-09)	Faculty
1	1-1469110209	MANAGEMENT	MASTERS IN MANAGEMENT STUDIES	POST GRADUATE	2	FULL TIME	60	60	60	60	60	8

Administrative Area

Type	Actual Room Area/Land Area	Expected Room Area/Land Area	Deficiency
Principal / Director Office	33	30	No
Central Store	38	30	No
Maintenance	10	10	No
Security	10	10	No
Housekeeping	12	10	No
Exam Control Office	30	30	No
Placement Office	31	30	No
Office All Inclusive	150	150	No

Amenities Area

Type	Actual Room Area/Land Area	Expected Room Area/Land Area	Deficiency
Boys Common Room	75.005	75	No
Girls Common Room	75.36	75	No
Cafeteria	150	150	No
Stationery Store	10.53	10	No
First aid cum Sick Room	12.5	10	No

Computational Facilities

Type	Available	Required	Deficiency
Internet Bandwidth	2	1	No
Printers	6	3	No
Legal Application S/W	10	10	No
Legal System S/W	1	1	No
PCs to Student ratio	60	60	No

Library Facilities

Type	Available	Required	Deficiency
Volumes	3290	3000	No
Titles	1515	350	No
National Journals	12	12	No
Library Management Software	1	1	No
Reading Room Capacity	35	30	No
MultiMediaPC	5	3	No

Instructional Area-Common Facilities

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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Type	Actual Room Area/Land Area	Expected Room Area/Land Area	Deficiency
Computer Center	158	150	No
Library & Reading Room	100	100	No

Land Area Details

Type	Actual Room Area/Land Area	Expected Room Area/Land Area	Deficiency
Rural	2.5	1	No

MANAGEMENT / Existing Programme

Type	Level	Actual Room Area/Land Area	Expected Room Area/Land Area	Deficiency
Class Room-Tutorial Room	POST GRADUATE	171	165	No
Seminar Hall	POST GRADUATE	133	132	No

eJournal

Type	Final Deficiency
eJournal	No

XX- No Rooms Available

DNA- Data Not Available / Insufficient Data

Blank Field-Data Not Entered

* Laboratories required and Actual Number includes Total Number of Laboratories, Research Laboratories, and Additional WS/Labs for UG and PG courses, as applicable

^ Actual Number of Tutorial Rooms for Under Graduate includes the Number of Tutorial Rooms Available for PG, if applicable

** Actual Number of Guest Rooms for Under Graduate includes the Actual Number of Guest Rooms Available for PG, if applicable

*** Actual Number of Kitchen for Under Graduate includes the Actual Number of Kitchen Available for PG, if applicable

Other Facilities

Type	Availability	Deficiency
All Weather Approach (Motorised Road)	Y	N
Barrier free Environment	Y	N
Electric Supply	Y	N
General Insurance	Y	N
Institution Web Site	Y	N
Language laboratory (Minimum 25 PCs up to total intake of 1000. Further additional 25 PCs per intake of 1000)	Y	N
Medical & Counseling	Y	N

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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Type	Availability	Deficiency
Notice Boards	Y	N
Potable Water Supply	Y	N
Safety Provisions	Y	N
Sewage Disposal System	Y	N
Telephone & FAX	Y	N
Vehicle Parking	Y	N
First Aid	Y	N

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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DEFICIENCY REPORT AS PER INTAKE APPLIED FOR YEAR 2013-2014

Computational Facilities

Type	Available	Required	Deficiency
Internet Bandwidth-Applied Intake	2	1	No
Printers-Applied Intake	6	3	No
Legal Application S/W-Applied Intake	10	10	No
Legal System S/W-Applied Intake	1	1	No
PCs to Student ratio-Applied Intake	60	60	No

Library Facilities

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Volumes	3290	3000	No
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Instructional Area

MANAGEMENT / Existing Programme

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** Actual Number of Guest Rooms for Under Graduate includes the Actual Number of Guest Rooms Available for PG, if applicable

*** Actual Number of Kitchen for Under Graduate includes the Actual Number of Kitchen Available for PG, if applicable

Information regarding intake applied

Sr Num	Course Unique Id	Program	Course	Level	Shift	Approved Intake 12-13	Intake Applied 13-14	Application type	Accreditation status	NRI	PIO	Foreign Collaboration
1	1-1469110209	MANAGEMENT	MASTERS IN MANAGEME	POST GRADUATE	1st Shift	60	60	EoA Only	NOT ACCREDITED	Not interested	Not int	N

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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Sr Num	Course Unique Id	Program	Course	Level	Shift	Approved Intake 12-13	Intake Applied 13-14	Application type	Accreditation status	NRI	PIO	Foreign Collaboration
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Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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DECLARATION
BY THE PRINCIPAL/DIRECTOR OF THE INSTITUTE

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

a) That, I have carefully gone through the AICTE Notification dated 27th September 2012, published in the Gazette of India - Extraordinary Part 3, Section (iv) and also the various provisions mentioned in the Approval Process Hand Book 2013-14.

b) That, I am fully aware of the data uploaded by me in respect of my institute on the web portal.

c) That, I am aware that there is no provision of correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.

d) That, I am also aware that application for seeking Extension of Approval, Increase/Reduction of intake, Addition of new courses, Dual Degree course, Integrated Course, Second Shift Programme, Part-time program, Change of site, Closure of course, Supernumerary Seats under PIO, NRI, Change of name, and Conversion of women institute into Co-ed institute (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2013-14.

e) That, I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the factual data uploaded by my institute on the portal.

f) That, I am also aware that the institute is eligible for grant of Extension of Approval, Increase/Reduction of intake, Addition of new courses, Closure of course, supernumerary seats under PIO, NRI, Change of name, Dual Degree course, Integrated course, Second shift programme, Part-time program, Change of site, Conversion of women institute into Co-ed institute (as applicable) only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2013-14.

Date of Signature		Seal of Institute		Name & signature of Director /Principal	
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