**ACTIVITY REPORT 2018-19 \_\_\_\_\_\_\_\_\_\_\_\_ DEPARTMENT/ COMMITTEE/ FACULTY**

**IQAC ACTIVITY No:**

|  |
| --- |
| **NAME OF THE ACTIVITY:** |
| **DATE** | **FACULTY** | **DEPARTMENT/COMMITTEE** | **COORDINATOR NAME** |
|  |  |  |  |
| **TIME** | **VENUE** | **NUMBER OF PARTICIPANTS** | **NATURE: Outdoor/Indoor** |
|  |  |  |  |
| **SUPPORT/ASSISTANCE:** |  |

BRIEF INFORMATION ABOUT THE ACTIVITY (**CRITERION NO. -**):

|  |  |
| --- | --- |
| **TOPIC/SUBJECT OF THE ACTIVITY** |  |
| **OBJECTIVES** |  |
| **METHODOLOGY** |  |
| **OUTCOMES** |  |

**PROOFS & DOCUMENTS ATTACHED (Tick mark the proofs attached):**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. Notice &Letters
 | 1. **Student list of participation**
 | 1. **Activity report**
 | 1. **Photos**
 | 1. Feedback form
 |
| 1. **Feedback analysis**
 | 1. News clip with details
 | 1. Certificate
 | 1. Any other
 |  |

IQAC CELL:

IQAC CELL ACTIVITY NUMBER:

|  |  |  |  |
| --- | --- | --- | --- |
| NAME OF TEACHER & SIGNATURE | NAME OF HEAD/ COMMITTEE INCHARGE & SIGNATURE | VICE PRINCIPALS SIGNATURE | IQAC COORDINATOR (SEAL & SIGNATURE) |
|  |  |  |  |