APPROVAL PROCESS 2023-24

APPLICATION REPORT

INSTITUTION DETAILS

INSTITUTION DETAILS: BASIC DETAILS

Current Application Number	1-36494063513	**Application Type**	Extension-Expansion-Closure
Current Status	Submitted	**Sub Status**	Payment Received
Permanent Institution ID	1-4997272421	**Academic Year**	2023-2024
Approval Status of Application	Data Not Available	**Application Opened Date**	05/04/2023
Application Submitted Date	06/04/2023	**Attend Scrutiny Committee Date**	Data Not Available
Appeal Requested Date	Data Not Available	**Application Reopened Date**	Data Not Available
Overall Deficiency	No		

INSTITUTION DETAILS: MORE INFORMATION

Name of Institution	Baba Farid College	**Address of Institution**	Bathinda-Muktsar Road, Deon., Bathinda
State/ UT	Punjab	**District**	Bathinda
Town/ City/ Village	Deon	**AICTE Region**	North-West
PIN	151002	**Women's Institution**	No
Institution Type	Private-Self Financing	**Any Self- Financed Course ?**	Yes
Percentage Grant Received from Government	0	**Are you an Institution for PWD Students**	No
Whether Institution is NAAC Accredited ?	N	**NAAC CGPA**	Data Not Available
Letter Grade	Data Not Available	**NAAC Status**	Data Not Available
Minority Institution	No	**Type of Minority Institution**	NA
Minority Name, if Linguistic	NA	**Name of the Minority**	Data Not Available
Minority Certificate Issued Date	Data Not Available	**Minority Certificate Valid Till**	Data Not Available
Year of Establishment	2019	**Mandatory Disclosure Link**	Data Not Available
Year of 1st Approval from AICTE	2019	**Apply for ODL/Online New Institute?**	Data Not Available
AISHE Prefix	C	**AISHE Numeric Code**	22250
AISHE Code	Data Not Available	**Whether Institution is Graded Autonomy ?**	Data Not Available
NBA Accreditation Points	0	**NBA Points Valid Till**	Data Not Available
University	N	**Whether your University has been recognized as an Institute of Eminence by MOE?**	Data Not Available
Is the Land Shared with other Institute?	N	**Is your Institution newly Approved last year(LoA) & failed to Admit Students?**	N
Is your Institution having Autonomous Status (Academic Autonomy) as conferred by the Affiliating University?		No	

Date of Signature(dd/mm/yyyy)   Seal of Institution   Name & Signature of Director/Principal

1-36494063513   Page **1** of 4

HOI & Faculty Members

PRINCIPAL / DIRECTOR

PERSONAL DETAILS

Surname/Family name	Kumar	**First Name**	Pardeep
Father's Name	Baboo Ram	**Mother's Name**	Pushpa Vati
Date of Birth	23/08/1972	**Mobile Number**	9501115200
STD code	164	**Land Phone Number**	2786020
Email	principalbfc@babafaridgroup.com	**PAN**	AQDPS6774L

EDUCATIONAL DETAILS

Doctorate Degree	Yes	**Master's Degree**	MA
Bachelor's Degree	BA	**Other Qualifications**	NET
International Certification (If Any)	NA	**Field of Specialization**	

DETAILS RELATED TO PROFFESSION

Date of joining the Institution	01/04/2019	**Appointment Type**	Regular
Exact Designation	Principal		

WORK EXPERIENCE DETAILS

Teaching Experience (Years)	18	**Research Experience (Years)**	17
Industry Experience (Years)	0		

OTHER DETAILS

Research Projects Guided - UG	0	**Research Projects Guided - PG**	200
Research Projects Guided - PhD		**Number of Books Published**	1
Papers Published - National	42	**Papers Published - International**	21

FACULTY NORMS AND PAY SCALE

Are all Approved teaching Faculty Members being paid as per present AICTE pay scale?	Yes
Are all the teaching Faculty Members, as per AICTE/UGC Norms?	Yes
List of Faculty Members and data uploaded on the institution's web portal.	Yes

FACULTY MEMBERS LIST
Details available as on AICTE Web Portal

Sr. No.	Faculty ID	First Name	Last Name	PAN	Gender	Date of Birth	Designation	Appointment Type	Programme	Department	Course	Date of Joining	Diploma	UG	PG	Doctorate Degree	FY/Common Subject Teacher?	FY/Common Subject
1	1-7511427801	SHALU	GUPTA	ANIPS5563M	Female	27/09/1982	ASST PROFESSOR	Regular	MCA	MASTERS IN COMPUTER	MASTERS IN COMPUTER	29/06/2018	N	N	Y	Y	N	
2	1-7511427808	MANISH	KUMAR	AMWPK3623R	Male	21/08/1978	PROFESSOR	Regular	MCA	MASTERS IN COMPUTER	MASTERS IN COMPUTER	15/06/2006	N	N	Y	Y	N	

Date of Signature(dd/mm/yyyy)	Seal of Institution	Name & Signature of Director/Principal

S.No	ID	First Name	Last Name	PAN	Gender	DOB	Designation	Nature	Qualification	PG Degree	Doctoral/Highest Degree	Date of Joining					
3	1-7511428284	AMANDEEP	SINGH	APMPS4388E	Male	03/10/1980	PROFESSOR	Regular	MCA	MASTERS IN COMPUTER	MASTERS IN COMPUTER	29/08/2005	N	N	Y	Y	N
4	1-7511914333	TEJINDER	SINGH	FLAPS2821D	Male	20/10/1984	PROFESSOR	Regular	MCA	MASTERS IN COMPUTER	MASTER OF COMPUTER APPLICATIONS	25/07/2009	N	N	Y	Y	N
5	1-11322392524	RAMANDEEP	KAUR	DZJPK3938N	Female	03/07/1993	ASST PROFESSOR	Regular	MCA	MASTER OF COMPUTER APPLICATIONS	MASTER OF COMPUTER APPLICATIONS	27/07/2016	N	N	Y	N	N
6	1-11322484073	KIRAN	.	EEHPK1452M	Female	24/05/1992	ASST PROFESSOR	Regular	MCA	MASTER OF COMPUTER APPLICATIONS	MASTER OF COMPUTER APPLICATIONS	28/10/2015	N	N	Y	N	N

ODL FACULTY DETAILS
Data not entered by Institution

OL FACULTY DETAILS
Data not entered by Institution

Date of Signature(dd/mm/yyyy)   Seal of Institution   Name & Signature of Director/Principal

DECLARATION

BY THE AUTHORIZED SIGNATORY OF THE INSTITUTION DEPARTMENT

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

a) **I have carefully gone through the AICTE Regulations 2021, published in the Gazette of India Extraordinary Part III, Section- 4 dated 04th February, 2021, also all provisions mentioned in the Approval Process Handbook 2023-24.**

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 submitted 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 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 Handbook 2023-24.**

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 University is eligible for grant of Extension of Approval to the Existing Institution, Extended EoA(if Applicable as per APH 2023-24),Change in name of the University or Affiliating University/Board,only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Handbook 2023-24.**

Signature of Authorized Signatory

Name :

Date of Signature(dd/mm/yyyy)   Seal of Institution   Name & Signature of Director/Principal