



INTERNAL QUALITY ASSUARANCE CELL (IQAC)

PROFORMA FOR REPORT ON ACADEMIC EVENTS (CURRICULAR AND CO-CURRICULAR)

Name of the Department:

Category	Conference/Seminar/Workshop/Symposium/Orientation Programmes/Others			
Name of the event				
Date				
Theme				
Level	International/National/Regional/University level			
Convener				
Organizing Secretary				
Student Coordinators if any				
Other Agencies/Collaborators involved				
Total No. of Participants/Beneficiaries	External	Internal	Total	
Total No. of Institutes represented by participants				
Diversity of participants: State wise in case National Event and Country Wise in case International Event				
List of National and International Dignitaries/resource persons invited and their role in the events	Name	Affiliation	Resource Person/Role	Title of the Presentation

If it is International Event, whether formal approval from Ministry of External Affairs obtained	Yes/No If Yes, enclose relevant documents			
Total Expense for the event (Rs)				
Financial Assistance from AMET (Rs)				
Financial Assistance from Govt Agencies	Name of the Agency	Amount (Rs)		
Sponsors/Financial Assistance from Private agencies (Rs)	Name of the Agency	Amount (Rs)		
Souvenir/Book of Abstracts/Proceedings released	Yes/No If yes, ISBN No:.....			

NECESSARY ENCLOSURES

Particular	Enclosed
Brochure and Invitations	Yes/No
Copy of Approval from AMET Authority	Yes/No
Registration/Attendance of Participants	Yes/No
2-3 Page Write up on the event	Yes/No
Analysis report for feedback and action plan for improvement	Yes/No
Three copies of Souvenir/Book of Abstracts/Proceedings	Yes/No
Newspaper/Media appearance	Yes/No
Proof for settling of accounts	Yes/No

Signature of the Convener/Organizing Secretary

Signature of the Head of the Department



INTERNAL QUALITY ASSUARANCE CELL (IQAC)
PROFORMA FOR REPORT ON ACADEMIC EVENTS
(EXTRA CURRICULAR/EXTENSION/SOCIAL SERVICE)

Name of the Department:

Category	Extension Activity/Social Service event/Others
Name of the event	
Date	
Theme	
Faculty Coordinator	
Student Coordinators if any	
Total No. of Beneficiaries	
Total No. of AMET Students involved	
Other agencies /collaborators involved	
Total Expense for the event (Rs)	
Financial Assistance from AMET (Rs)	
Financial Assistance from Govt Agencies (Rs)	
Sponsors/Financial Assistance from Private agencies (Rs)	
Any technical brochure or handouts released	Yes/No If yes, enclose the details

NECESSARY ENCLOSURES

Particular	Enclosed
Brochure/Invitation/Communication	Yes/No
Copy of Approval from AMET Authority	Yes/No
Registration/Attendance of Participants	Yes/No
2-3 Page Write up on the event	Yes/No
Analysis report for feedback and action plan for improvement	Yes/No
Newspaper/Media appearance	Yes/No
Proof for settling of accounts	Yes/No

Signature of the Faculty Coordinator

Signature of the Head of the Department