**APPLICATION FOR RECOGNITION OF A DEPARTMENT/CENTRE OF AN AFFILIATED COLLEGE/INSTITUTION OF ALAGAPPA UNIVERSITY AS APPROVED RESEARCH CENTRE**

(TO BE SUBMITTED IN **TRIPLICATE IN TYPEWRITTEN FORM**)

This form of application along with supporting documents should be forwarded to the **Dean (Research), Alagappa University, Karaikudi – 630 003** through the Principal of the College / Head of Institution concerned. **Handwritten / Incomplete application will not be accepted.**

**I. INDENTIFICATION DETAILS**

1. Name of the College/Institute :
2. Address for Communication :

Tel:

Fax:

Email:

1. Name of the Department which seeks :

Approved Research Centre status

**II. DEPARTMENT PROFILE :**

1. **Details of the Faculty Members:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl. No. | Name of the Faculty Member | Designation | Qualification | Date of acquisition of PhD Degree | Date of Appointment in regular faculty position | Date of Superannuation |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |

**b) Programmes offered by the Department**

|  |  |  |  |
| --- | --- | --- | --- |
| Sl. No. | Name of the Programme (U.G. / P.G.) | Subjects taught | Offered since |
| 1. |  |  |  |
|  |
|  |
| 2. |  |  |  |
|  |

**c) Library Facilities:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl. No. | No. of Books available in the Department Library (as per the Stock Register) | No. of Journals subscribed in the Department/College in the relevant discipline | | No. of Books available in the Department/ College Library in the relevant discipline (as per the Stock Register)\* |
| International | National |
|  |  |  |  |  |

\* List of Books along with the accession number may be provided in a separate sheet.

**d) Details of the Journals subscribed in the relevant discipline**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sl. No. | Name of the Journal | Publisher and ISSN Number | Institutional/Personal Subscription | Subscribed since |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |

1. **Laboratory space available for conducting research**

(laboratory space in sq. m. with Laboratory Tables/Gas connection etc may be provided in detail)

1. **Laboratory Equipments available in the Department:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl. No. | Name of the Equipment | Make & Model | Date of Installation | Funding Agency | Cost in Rs. | Working Condition |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
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**g) Computer, multimedia and internet connectivity facility available in the Department/in the College as a Central facility**

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Make and Model | Number of Systems available for Research | Year of Purchase |
| Computer Systems |  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| Printers |  |  |  |
| Photocopier |  |  |  |
| LCD |  |  |  |
| OHP |  |  |  |
| Details of Internet connectivity available |  | | |
| Details of Smart Classrooms available |  | | |

**h) Conferences / Seminars / Workshops organized by the Department:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sl. No. | Date (s) | Name of the Conference / Seminar / Workshop etc., | Number of Participants | Number of Resource Persons | Sponsoring Agency |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |

Please attach Proceedings/Brochure of the Conference/Seminar/Workshops.

1. Details of the Research Publications made by the Faculty Members of the Department during the last five years in peer reviewed/indexed journals

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl. No. | Complete List of authors\* | Title of the paper | Journal name, Publisher, Country | Vol. Number, Page number, Year | ISSN Number | Impact Factor if any |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |

\* Name(s) of the Faculty Member(s) of the Department may please be underlined. Original reprints must be enclosed with the application.

j) Research Project Details:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Sl. No. | Name of the  Principal  Investigator | Title of the Project | Funding Agency (Major / Minor) | Ongoing | Completed | Grant  (In Lakhs) |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |

Copy of Project Sanction Orders issued by the funding agencies must be enclosed.

**k) Awards & recognition received by faculty members**

Signature of the Faculty Member(s) who has/have taken the initiative

Signature of the Head of the Department

Place: SIGNATURE OF THE PRINCIPAL / HEAD OF

THE INSTITUTION FORWARDING THE

Date: APPLICATION WITH DATE

(WITH OFFICE SEAL)