

# The West Bengal University of Teachers' Training, Education Planning and Administration

25/2 & 25/3, Ballygunge Circular Road, Kolkata - 700019

# Notice Date: 18.08.2020

## Notification for affiliation for 4 Year Integrated B.A.B.Ed./B.Sc.B.Ed. Programme

Session – 2020-2024 Schedule

Date of commencement of application for renewal of affiliation (form attached)

:19/08/2020

Last date of submission of data through E-Mail

:25/08/2020

(E-Mail id: - helpdeskwbuttepa@gmail.com)

Last date of online payment of affiliation fee

:28/08/2020

Bank Details:	
Account No.	35637051022
Account Name	WBUTTEPA COLLEGE
IFSC Code	SBIN0000040
Branch	BHOWANIPORE

Registrar

(Mr. Abhijit Biswas)

WBUTTEPA

Registrar The West Bengal University of Teachers' Training, Education Planning and Administration

# Application for affiliation of 4 year integrated B.A.B.Ed./B.Sc.B.Ed. Programme

Name of the College	
Category & Type of the College	7
Postal Address	
Phone No. (Institution)	
E-mail (Institution)	
Fax No. (Institution)	
Website	
Name of the Contact person	
Mobile No. (Contact person)	
Head of the Institution ( Principal / TIC/ OIC)	
Name (Head of the Institution)	- J
Mobile No. (Head of the Institution)	***
E-mail (Head of the Institution)	100
Nature of the College	
Already affiliated under Other university	
Previous University Name	
Discontinuation Period (If any)	
NCTE Recognition Year	
Recognized under 2(f) of UGC	
Recognized under 12(B) of UGC	-
Accreditation /Reaccreditation by NAAC	
NAAC Cycle	
Admission Process	
Nearest Railway Station	
Distance from College	
Bus Route	
Distance from College	
Nearest Police Station	200
Police Station Phone No.	
Endowment Fund Issuing Bank	
Amount of Endowment Fund with FDR No.	
Reserve Fund Issuing Bank	
Amount of Reserve Fund with FDR No.	
Bank Name (Institution)	
Bank Account No. (Institution)	
Name of the Acct. holder (Institution)	
Bank Branch Name (Institution)	
Bank IFS Code (Institution)	

PROGRAMME OFFERED

NAME OF THE PROGRAMME	NAME OF THE COURSE	NO. OF UNIT	YEAR OF ESTABLISHMENT

SUBJECTS TAUGHT

INFORMATION ABOUT THE GOVERNING BODY / MANAGING COMMITTEE

INFORMATION ABOUT THE GOVERNING BOD	I / WINIAMOING CON
MEMBER NAME	MEMBER DESIGNATION
Date of formation of last GB / MC	
No of meetings held/ year	
Last meeting date	

LAST YEAR STUDENTS' DATA

	NO. OF STUDENT
BOYS	
GIRLS	
SC	
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OBC B	
MINORITY	
PWD	

LAST YEAR STUDENT RESULT

	NO. OF STUDENT
70% OR MORE	
60% - 69.99%	
50% - 59.99%	
LESS THAN 50%	. 91
70% OR MORE	

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AREA OF SPECIALIZA TION			
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ACADEMIC SCHO C QUALIFICA OL TION EXP.			
DATE OF BIRTH			
DATE OF JOIN			
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NAME			
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# LIBRARY STAFF INFORMATION

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# ON-TEACHING STAFF INFORMATION

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		NAME	DESIGNAT	OTHER DESIGNAT ION	DATE OF BIRTH	ACADEMI C QUALIFICA TION	EMPLOYM ENT TYPE	EXPERIE	EMA	REMAR
	-									

IQAC Coordinator	
IQAC Coordinator Contact No.	
IQAC Coordinator Email	

## INFORMATION ABOUT THE INFRASTRUCTURAL FACILITIES Institution is in possession of land The institution proposes to function from a rented building Title of the land is in favour of Plot Number Area Total Built up area The institution proposes to function from its own building Title of the land is on free-hold ownership basis 1. 2. Class Room Dimension (in sq. Meter) 3. 4. 5. cont. Number of classroom No. of books in Library No. of Journal e-publication No. of reading room Total no. of Seating Capacity in reading room Building: The institution is functioning from its own building (YES/NO) Institution building under construction (YES/NO) Availability of OHP/ LCD Projector (YES/NO) No. of Photocopier (YES/NO) Internet Facility (YES/NO) Life science Lab (YES/NO) Psychology Lab (YES/NO) Geography Lab (YES/NO) Language Lab (YES/NO) Physical Science Lab (YES/NO) Mathematics Lab (YES/NO) Educational Technology Lab (YES/NO) Computer Lab (YES/NO) Curriculum Lab (YES/NO) Other Lab (if any) (YES/NO) Separate rooms for Principal (YES/NO) Separate rooms for Office (YES/NO) Furniture adequate (YES/NO) Separate toilets for Ladies & Gents (YES/NO)

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Separate toilets for Staff (YES/NO)
No. of toilets adequate (YES/NO)
Separate rooms for Faculty (YES/NO)
if YES, mention no. of faculty and room

Play ground (YES/NO)

Store room (YES/NO)	
Canteen (YES/NO)	
Common rooms for Boys & Girls (YES/NO)	Gest The second
First aid available (YES/NO)	
Multipurpose Hall available (YES/NO)	
Seating capacity in Multipurpose Hall	
Drinking water facility (YES/NO)	
Necessary arrangements for Physically Challenged Students- ( YES/NO)	
Electricity available (YES/NO)	
Hostel for Boys available (YES/NO)	
No. of Seats	
Hostel for Girls available (YES/NO)	
No. of Seats	
Fire Safety (YES/NO)	
Arts and Crafts Resource Centre (YES/NO)	
Indoor Game Facilities Available (YES/NO)	
Fees collected from students through Bank or not	
Quarter for Staff (YES/NO)	
Health and PhyEdn Resource Centre (YES/NO)	
Cultural Activities performed (YES/NO)	
Grants received (YES/NO)	

CLOSED FOLLOWIN	G COPY
NCTE Revised Recog	gnition Order (only pdf file max. size 2MB) (if any)
NCTE Initial Recogni	ition Order (only pdf file max. size 2MB)
Previous University	Affiliation Cert. (only pdf file max. size 2MB) (if any)
Govt. NOC (only pdf	file max. size 2MB)
Land Document (on	ly pdf file max. size 2MB)
Building Completion	Certificate & Building Plan (only pdf file max. size 2MB)
Fire Safety Certifica	te (only pdf file max. size 2MB)
FDR copy (only pdf	file max. size 2MB)
Last Audit Report w	ith accounts statement (only pdf file max. size 2MB)
Document of studer	nt fee (only pdf file max. size 2MB)
Image of the Institu (only jpeg file max.	
Payment of the staf	f members (only pdf file max. size 2MB)
Specimen Signature (only jpeg file max.	of Principal / Secretary / President of the Institution with seal size 500kb.)
Others relevant doc	ument (if any)