



திருவள்ளூர் பல்கலைக்கழகம்
THIRUVALLUVAR UNIVERSITY
SERKKADU, VELLORE - 632 115

Individual Report

**By the experts for considering the grant of fresh/further affiliation
for the courses in the Arts and Science Colleges**

(To form part of the overall Report and to be given to the Convener)

NAME OF THE COLLEGE :

**COURSE FOR WHICH
INDIVIDUAL REPORT IS GIVEN :**

DATE OF INSPECTION :

ASSESSMENT AND RECOMMENDATIONS IN RESPECT OF EACH ONE OF THE FOLLOWING

1. Classroom, space & furniture

2. Teaching Staff:

**(please specify as per the workload prescribed by the University)
Required/Already appointed/to be appointed.**

3. Laboratory Equipment & Space:
(kindly specify the name of the equipments and time limit within which it must be procured and installed)

4. Library: (please specify the list of books and journals)

5. **Specific recommendations to grant/not to grant fresh college/new course/additional/continuation of provisional affiliation for the courses for the academic year.**

**PLACE:
DATE:**

**NAME & SIGNATURE OF THE
MEMBER-INSPECTION COMMISSION**