



**Letter of Intent (LOI) for Physical Education (PE) / Teacher Education (TE) Colleges  
&  
Departments of PE / TE of Colleges**

**Note:**

1. Separate LOIs are to be submitted for each of the units of accreditation i.e., TE department/ PE department / College.
2. Respective LOIs submitted, should contain data pertaining only to the specific unit for which Accreditation is sought.

Please select any one of the following

- College of Physical Education
- Department of Physical Education of a General College
- College of Teacher Education
- Department of Teacher Education of a General College

Date of submission: 19/10/2012

Institution Email ID: subhaschandrabasu@rediffmail.com

1	Letter of Intent	<input checked="" type="checkbox"/> Accreditation <input type="checkbox"/> Re-Assessment
	Cycle of Accreditation (When an institution undergoes the accreditation process for the first time it is referred to as Cycle 1 and the consecutive five year periods as Cycles 2, 3, etc.)	<input checked="" type="checkbox"/> Cycle 1 <input type="checkbox"/> Cycle 2 <input type="checkbox"/> Cycle 3
	Date of previous accreditation by NAAC (applicable for Cycle 2, Cycle 3, Cycle 4 and Re-Assessment only)	Cycle 1: ..... (DD/MM/YYYY) Cycle 2: ..... (DD/MM/YYYY) Cycle 3: ..... (DD/MM/YYYY) Cycle 4: ..... (DD/MM/YYYY)
2	Name of the College / Department	SUBHAS CHANDRA BASU B.ED. TRAINING COLLEGE
3	Name of the Head of the Institution / Department	Dr. Bijaya Kumar Nayak
3.a	Designation	Principal

4	Address	Vill – Jarnagar, P.O. – Heria, Dist- Purba Medinipur	
	State/UT		
	City	Contai	
	Pin	721427	
	Phone No	03220 276758	
	Alternate Phone No	03220 276139	
	Mobile No	9434028176	
	Alternate Mobile No.	9732624046	
	Fax	03220276758	
	Email	subhaschandrabasu@rediffmail.com	
	Alternate Email	Arunabha.mandal@rediffmail.com	
	Website [e.g.:www.abc.com ]	www.annweshasubhas.com	
*(Website domain addresses with special characters are not accepted due to security reasons.)			
5	Date of establishment of the College / Department	03 / 05 / 2007	Copy Enclose : 1
<b>Attach NCTE Recognition</b>			
5.a.	Have two batches of students graduated from the College / Department?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6.a.	Is the College recognized under section 2(f) of the UGC Act?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If yes, date of recognition by UGC under section 2(f)	.....(DD/MM/YYYY)	
<b>Attach UGC 2(f) certificate</b>			
6.b.	Is the College recognized under section 12B of the UGC Act?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If yes, date of recognition by UGC under section 12B	.....(DD/MM/YYYY)	
<b>Attach UGC 12B certificate</b>			
<b>Attach latest Grant Certificate</b>			
7.a.	Name of the university to which the college is affiliated, or of which the college is a constituent	<b>Provide details:</b>	
	State in which the affiliating university is located	West Bengal	
	Name of the university	Vidyasagar University	
	<b>Attach affiliated/constituent recognition certificate</b>	Copy Enclose : 2	
	Type of affiliation	<input type="checkbox"/> Temporary <input checked="" type="checkbox"/> Permanent	
7.b.	If the institution is not affiliated to a university, does it offer any programmes recognized by any Statutory Professional Regulatory (SPR) Council (which is equivalent to a post graduate programme of a university) (e.g. :NCTE, AICTE,MCI,DCI,NCI etc..)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	<b>If yes, provide details:</b>		
	Name of the programmes		
	Name of SPR Council recognizing it		
	Equivalent university degree		
8.a.	Is the institution recognised as an Autonomous College by the UGC?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	<b>If yes, provide details:</b>		
	Date of conferment of the status:	.....(DD/MM/YYYY)	
<b>Attach Autonomous status certificate</b>			
8.b.	Is the institution recognised as a 'College with Potential for Excellence (CPE)' by the UGC?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	<b>If yes, provide details:</b>		
	Date of conferment of the status:	.....(DD/MM/YYYY)	
<b>Attach CPE status certificate</b>			

8.c	Is the College / Department offering any other programmes recognized by any Statutory Regulatory Authority (SRA)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<b>If yes, provide details:</b>	
	Statutory Regulatory Bodies	<input type="checkbox"/> AICTE <input type="checkbox"/> DCI <input type="checkbox"/> NCTE <input type="checkbox"/> MCI <input type="checkbox"/> PCI <input type="checkbox"/> Other
	<b>Attach SRA status certificate</b>	
9.a	Nature of the College	<input type="checkbox"/> Government <input type="checkbox"/> Private
	<b>If Private</b>	<input type="checkbox"/> Grant-in-aid <input checked="" type="checkbox"/> Self financing
9.b	Number of Degrees offered by the College / Department	
	Certificate	
	Diploma	
	UG	01
	PG	
	PG Diploma recognized by statutory authority	
	Research	
	Others	
9.c	Details of Degrees offered by the College / Department	
	Education	Bachelor of Education
	Others	
10	Total Number of	
	Teaching Staff in the College / Department	01 + 07
	Non-Teaching Staff in the College / Department	07
	Students in the College / Department	100
11	Date of establishment of IQAC (Optional for Cycle 1)	03 / 05 / 2009