UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE : UGC OFFICE
DATE : 19-5-15
S.NO. : 1

To be filled by representatives of university department:

NAME OF DEPARTMENT
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):
NAME AND ADDRESS OF UNIVERSITY
PRESENT FACULTY STRENGTH (Total)
No. OF PROFESSORS:
2(F) STATUS (Y/N):
12 (B) STATUS (Y/N):
SELF FINANCED DEPT.T.(Y/N):
PRESENT TENURE: FROM ______ TO ______ PRESENT PHASE: ______ PRESENT FILE-NO.: ______

(Signatures and Names of University Representatives):
1) ____________________________ 2) ____________________________

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s)

NAME OF CO-ORDINATOR
NAME OF DEPUTY COORDINATOR
FINANCIAL RECOMMENDATIONS
NON-RECURRING = ________
RECURRING = ________
NO. OF PROJECT FELLOW(s) = ________
TOTAL = ________

NAME OF ADVISORY COMMITTEE MEMBERS

THE COMMITTEE STRONGLY RECOMMENDS
(A) Department be inducted at status of DRS - I from ________ to ________ [ ]
(B) Department be upgraded to status of ________ from ________ to ________ [ ]
(C) Department may continue at status of ________ from ________ to ________ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signature]

[Signature]

[Signature]

[Signature]

[Signature]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  DATE: 19.5.2015  S.NO.: 2

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Chemistry

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): headchem2011@gmail.com

NAME AND ADDRESS OF UNIVERSITY: Pachmarhi Hindu University, Varanasi, 221 005

PRESENT FACULTY STRENGTH (Total): 33  No. OF PROFESSORS: 20

(2F) STATUS (Y/N): 12 (E) STATUS (Y/N):  SELF FINANCED DEPT. (Y/N): NO

PRESENT TENURE: FROM 2010 TO 2015  PRESENT PHASE: CAS  PRESENT FILE NO.: F-540/19/CAS/2015

(Signatures and Names of University Representatives):
1) [Signature]
   Prof. B. Singh

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSTR AREA(s): Structural Chemistry & Functional Chemistry

NAME OF CO-ORDINATOR: Prof. B. Singh

NAME OF DEPUTY CO-ORDINATOR: Prof. D. S. Pandey

FINANCIAL RECOMMENDATIONS: NON-RECURRING = Rs. 228.50 lakh

   RECURRING = Rs. 51.50 lakh

   NO. OF PROJECT FELLOW(S) = Nil

   TOTAL = Rs. 280.00 lakh

NAME OF ADVISORY COMMITTEE MEMBERS:

   1) Prof. A. Nangia, School of Chemistry, Univ. of Hyderabad
   2) Prof. Sanjiv Mathur, Department of Chemistry, Jadavpur University

THE COMMITTEE STRONGLY RECOMMENDS [TICK ANY ONE]

(A) Department be inducted at status of DRS - I from to [ ]

(B) Department be upgraded to status of CAS from I to II [ ]

(C) Department may continue at status of from to [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[F.]. (5/15)

[Name]

[Signature]

[Name]

[Signature]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19-5-15
S.NO.: 3

To be filled by representatives of university department:

<table>
<thead>
<tr>
<th>NAME OF DEPARTMENT</th>
<th>Chemistry</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONTACT DETAILS OF DEPARTMENT (E-MAIL &amp; PH)</td>
<td>Kuvempu University</td>
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<td>NAME AND ADDRESS OF UNIVERSITY</td>
<td></td>
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<tr>
<td>PRESENT FACULTY STRENGTH (Total)</td>
<td>No. OF PROFESSORS:</td>
</tr>
<tr>
<td>2(F) STATUS (Y/N):</td>
<td>12 (B) STATUS (Y/N):</td>
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<tr>
<td>PRESENT TENURE: FROM</td>
<td>TO</td>
</tr>
</tbody>
</table>

(Signatures and Names of University Representatives):

1) 
2) 

To be filled by Expert Committee (RECOMMENDATIONS):

| THRUST AREA(s) | |
| NAME OF CO-ORDINATOR | |
| NAME OF DEPUTY COORDINATOR | |
| FINANCIAL RECOMMENDATIONS | NON-RECURRING = |
| | RECURRING = |
| NO. OF PROJECT FELLOW(s) = |
| TOTAL = |
| NAME OF ADVISORY COMMITTEE MEMBERS | |

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS - I from to [ ]
(B) Department be upgraded to status of from to [ ]
(C) Department may continue at status of from to [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signature 1] [Signature 2] [Signature 3] (18/5/2015)
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 9-5-15
S.NO.: 4

To be filled by representatives of university department:

NAME OF DEPARTMENT: Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):
NAME AND ADDRESS OF UNIVERSITY: Lucknow Univ
PRESENT FACULTY STRENGTH (Total): ________ No. OF PROFESSORS: ________
2(F) STATUS (Y/N): ________ 12 (P) STATUS (Y/N): ________ SELF FINANCED DEPTT.(Y/N): ________
PRESENT TENURE: FROM ________ TO ________ PRESENT PHASE: ________ PRESENT FILE-NO.: ________
(Signatures and Names of University Representatives):
1) ___________________________ 2) ___________________________

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): __________________________
NAME OF CO-ORDINATOR: __________________________
NAME OF DEPUTY COORDINATOR: __________________________
FINANCIAL RECOMMENDATIONS: NON-RECURRING = ________ RECURRING = ________
NO. OF PROJECT FELLOW(s) = ________ TOTAL = ________
NAME OF ADVISORY COMMITTEE MEMBERS: __________________________

THE COMMITTEE STRONGLY RECOMMENDS:
(A) Department be inducted at status of DRS - I from ________ to ________ [ ]
(B) Department be upgraded to status of ________ from ________ to ________ [ ]
(C) Department may continue at status of ________ from ________ to ________ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signatures and Names]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE : UGC OFFICE DATE : 19/09/2015 S.NO.: 5

To be filled by representatives of university department:

NAME OF DEPARTMENT : Department of Studies in Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH) : dnak.chem@yahoo.co.in
NAME AND ADDRESS OF UNIVERSITY : mpsadas@vsnl.com
University of Mysore
PRESENT FACULTY STRENGTH (Total) : 15 No. OF PROFESSORS : 11
2(F) STATUS (Y/N) : Y 12 (B) STATUS (Y/N) : Y SELF FINANCED DEPTT.(Y/N) : N
PRESENT TENURE: FROM 2009 TO 2014 PRESENT PHASE: II

(Signatures and Names of University Representatives):

1) (NAGARAJA NAIG)
2) (M.P. SADASHIVA)

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSS AREA(s) : Bioorganic & medicinal Chemistry

NAME OF CO-ORDINATOR : Prof. Nagaraja Naik
NAME OF DEPUTY COORDINATOR : Prof. M.P. Sadashiva
FINANCIAL RECOMMENDATIONS :
NON-RECURRING = Rs. 35,000 per annum
RECURRING = Rs. 55,000 per annum
NO. OF PROJECT FELLOW(s) = 2 (actuals)
TOTAL = Rs. 95,000 per annum + 2 Pts.

NAME OF ADVISORY COMMITTEE MEMBERS

1) Prof. Sivar K Das, Dept. of Chemistry, Univ. of Hyderabad
2) Prof. L. Surya Prakash Rao, DyPt. Acharya, Post-Grad. University

THE COMMITTEE STRONGLY RECOMMENDS

(A) Department be inducted at status of DRS - I from ________ to ________ [ ]
(B) Department be upgraded to status of ________ from ________ to ________ [ ]
(C) Department may continue at status of DRS from ________ to ________ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signature]
[Signature] [Signature] (G.T.P)
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE : UGC OFFICE
DATE : 19-5-15
S.NO.: 6

To be filled by representatives of university department:

NAME OF DEPARTMENT : Chemistry

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH) :

NAME AND ADDRESS OF UNIVERSITY : North Orissa Univ

PRESENT FACULTY STRENGTH (Total) : No. OF PROFESSORS:

2(F) STATUS (Y/N): 12 (B) STATUS (Y/N): SELF FINANCED DEPTT.(Y/N):

PRESENT TENURE: FROM TO PRESENT PHASE: PRESENT FILE-NO.:

(Signatures and Names of University Representatives):

1) ___________________________ 2) ___________________________

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s) :

NAME OF CO-ORDINATOR :

NAME OF DEPUTY CO-ORDINATOR :

FINANCIAL RECOMMENDATIONS :
NON-RECURRING =
RECURRING =
NO. OF PROJECT FELLOW(s) =
TOTAL =

NAME OF ADVISORY COMMITTEE MEMBERS :

THE COMMITTEE STRONGLY RECOMMENDS :

(A) Department be inducted at status of DRS-I from to [ ]

(B) Department be upgraded to status of from to [ ]

(C) Department may continue at status of from to [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signature]

[Signature]

[Signature]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  DATE: 19/04/2015  S.NO.: 7

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Chemistry

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): hod@chem.unipune.ac.in (head)
aksh@chem.unipune.ac.in (coordinator)

NAME AND ADDRESS OF UNIVERSITY: Sardar Patel Bhule Pune University

PRESENT FACULTY STRENGTH (Total): 29  No. OF PROFESSORS: 12

2(F) STATUS (Y/N):  ✓  12 (B) STATUS (Y/N):  ✓  SELF FINANCED DEPTT.(Y/N):  ✓

PRESENT TENURE: FROM  May 2015  TO  April 2020  PRESENT PHASE: CAS IV

PARENT FILE-NUMBER: F.540/18/CAS/2009/SAP-I

(Signatures and Names of University Representatives):

1) A.S. Kumbhar

2)  

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSS AREA(s): Design of materials for energy, environment, catalysis, drug design and development

NAME OF CO-ORDINATOR: Prof. Avinash S. Kumbhar

NAME OF DEPUTY CO-ORDINATOR: Prof. Samosh K. Hazam

FINANCIAL RECOMMENDATIONS: NON-RECURRING = 200,000 /annum

RECURRING = 85,000 /annum

NO. OF PROJECT FELLOW(s) = Nil

TOTAL = 285,000 /annum

NAME OF ADVISORY COMMITTEE MEMBERS: Prof. Aniruddha Samanta, Chem. Univ. Mumbai

Prof. Akhilash Kumar Verma, Chem. DNB, Lucknow

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS I from  to  [ ]

(B) Department be upgraded to status of  from  to  [ ]

(C) Department may continue at status of CAS III to CAS IV [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signatures]

[Names]
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE : UGC OFFICE  DATE : 19/03/2015  S.NO. : 8

To be filled by representatives of university department:

NAME OF DEPARTMENT : Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH) : Head Chemistry  S.K. University  S.K. University
NAME AND ADDRESS OF UNIVERSITY : S.K. University Anantapur  Andhra Pradesh
PRESENT FACULTY STRENGTH (Total) : 7  No. OF PROFESSORS : 5
2(F) STATUS (Y/N) : Yes  12 (B) STATUS (Y/N) : Yes  SELF FINANCED DEPTT. (Y/N) : Yes
PRESENT TENURE: FROM 2004 TO 2014  PRESENT PHASE : 1  PRESENT FILE-NO. :

(Signatures and Names of University Representatives):
1) J. Shiva Ramulu
   (Principal, Head)
2) 

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSTR AREA(s) : Physico-Chemical Characterization of Flower materials. Applications in Environment, Health & safety studies

NAME OF CO-ORDINATOR : Prof. J. Bose Ramulu
NAME OF DEPUTY CO-ORDINATOR : Prof. K. Sudhakar Babu
FINANCIAL RECOMMENDATIONS : NON-RECURRING = Rs. 30,000 lakhs
RECURRING = Rs. 23,000 lakhs
NO. OF PROJECT FELLOW(s) = 4
TOTAL = Rs. 53,000 lakhs

NAME OF ADVISORY COMMITTEE MEMBERS : 1) Prof. K.C. Kumargnath 
                                          2) Lallan Mishra

THE COMMITTEE STRONGLY RECOMMENDS :

(A) Department be inducted at status of DRS - I from ______ to ______ [ ]

(B) Department be upgraded to status of ______ from ______ to ______ [ ]

(C) Department may continue at status of DRS from ______ to ______ [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[ ]

[ ]

[ ]
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)
VENUE: UGC OFFICE
DATE: 19-05-2015
S.NO.: 19

To be filled by representatives of university department:

| NAME OF DEPARTMENT | : | CHEMISTRY |
| CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): | : | gangeswararao@ssshdl.edu.in |
| NAME AND ADDRESS OF UNIVERSITY | : | SAI SAIYA SAI INSTITUTE OF HIGHER LEARNING |
| PRESENT FACULTY STRENGTH (Total) | : | 7 | No. OF PROFESSORS: 1 |
| 2(F) STATUS (Y/N): | : | | 12 (F) STATUS (Y/N): | : | ✔ SELF FINANCED DEPTT. (Y/N): |

(Signatures and Names of University Representatives):

1) G. NAGESWARARAO

2) ______________________

To be filled by Expert Committee (RECOMMENDATIONS):

| THRUST AREA(s) | : |
| NAME OF CO-ORDINATOR | : |
| NAME OF DEPUTY CO-ORDINATOR | : |
| FINANCIAL RECOMMENDATION: NON-RECURRING = | : |
| RECURRING = | : |
| NO. OF PROJECT FELLOW(s) = | : |
| TOTAL = | : |
| NAME OF ADVISORY COMMITTEE MEMBERS | : |

THE COMMITTEE STRONGLY RECOMMENDS

(A) Department be inducted at status of DRS-I from ______ to ______ [ ]
(B) Department be upgraded to status of ______ from ______ to ______ [ ]
(C) Department may continue at status of ______ from ______ to ______ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signatures and dates]
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19-05-2015
S.NO.: 11

To be filled by representatives of university department:

NAME OF DEPARTMENT: CHEMISTRY

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): swainsk2@yahoo.co.in
09937052348, 09439736360

NAME AND ADDRESS OF UNIVERSITY: VYEER SURUDRA SA1 UNIVERSITY OF TECHNOLOGY,
BURIA, SAMBALPUR 768018

PRESENT FACULTY STRENGTH (Total): 44
No. OF PROFESSORS: 03

2(F) STATUS (Y/N): Y
12 (B) STATUS (Y/N): Y
SELF FINANCED DEPTT. (Y/N): N

PRESENT TENURE: FROM 2015 TO 2019
PRESENT PHASE: I
PRESENT FILE NO.: ______

(Signatures and Names of University Representatives):
1) [Signature] [Name]
   [Date]

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): MATERIALS CHEMISTRY

NAME OF CO-ORDINATOR: PROF. SARAT KUMAR SWAIN

NAME OF DEPUTY CO-ORDINATOR: DR. SIKANTAN DASH

FINANCIAL RECOMMENDATION:
NON-RECURRING =
RECURRING =
NO. OF PROJECT FELLOW(s) =
TOTAL =

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS-I from ______ to ______ [ ]

(B) Department be upgraded to status of ______ from ______ to ______ [ ]

(C) Department may continue at status of ______ from ______ to ______ [ ]

(D) Department be discontinued not recommended [X]

(Signatures and Names of Expert Committee Members):

[Signature] [Date]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  
DATE: 18 May 2015  
S.NO.: 12

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): smashibi@yahoo.com 0471 2368682
NAME AND ADDRESS OF UNIVERSITY: University of Kerala, Trivandrum
PRESENT FACULTY STRENGTH (Total): 6  
No. OF PROFESSORS: 1
2(F) STATUS (Y/N): Yes  
12 (E) STATUS (Y/N): Yes  
SELF FINANCED DEPTT.(Y/N): No
PRESENT TENURE: FROM _____ TO _____  
PRESENT PHASE: DG-I  
PRESENT FILE NO.: ______

(Signatures and Names of University Representatives):
1) [Signature]  
S.M.A. Shibu, (Head)

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): ____________________________

NAME OF CO-ORDINATOR: ____________________________

NAME OF DEPUTY COORDINATOR: ____________________________

FINANCIAL RECOMMENDATIONS:
NON-RECURRING = ____________________________
RECURRING = ____________________________
NO. OF PROJECT FELLOW(s) = ____________________________
TOTAL = ____________________________

NAME OF ADVISORY COMMITTEE MEMBERS:
______________________________
______________________________
______________________________

THE COMMITTEE STRONGLY RECOMMENDS: (TICK ANY ONE)
(A) Department be inducted at status of DRS - I from _____ to _____ [ ]
(B) Department be upgraded to status of _____ from _____ to _____ [ ]
(C) Department may continue at status of _____ from _____ to _____ [ ]
(D) Department be discontinued, not recommended. [ ]

(Signatures and Names of Expert Committee Members):
[Signatures]  
19/5/15  
19/5/15  
19/5/2015
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE D ATE: 19/05/2015 S.NO.: 13

To be filled by representatives of university department:

NAME OF DEPARTMENT: Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): Dept-CHEMISTRY, Dibrugarh University, 0376-2370220, Email: Pankajd29@yahoo.com
NAME AND ADDRESS OF UNIVERSITY: Dibrugarh University, Dibrugarh, Assam
PRESENT FACULTY STRENGTH (Total): 10
NO. OF PROFESSORS: 5
2(F) STATUS (Y/N): N 12 (B) STATUS (Y/N): Y SELF FINANCED DEPTT. (Y/N): N
PRESENT TENURE: FROM ___ TO ___ PRESENT PHASE: ___ PRESENT FILE NO.: ___

(Signatures and Names of University Representatives):
1) Prof. Pankaj Das
2) Dr. Diganta Barua

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSt AREA(s): Homogeneous and Heterogeneous Catalysis

NAME OF CO-ORDINATOR: Prof. Pankaj Das
NAME OF DEPUTY CO-ORDINATOR: Dr. Diganta Barua
FINANCIAL RECOMMENDATIONS:
NON-RECURRING = 115,000
RECURRING = 34,000
NO. OF PROJECT FELLOW(s) = ___
TOTAL = 149,000

NAME OF ADVISORY COMMITTEE MEMBERS:
1) Prof. Chatterjee, Kalyani
2) Prof. B. Singh

THE COMMITTEE STRONGLY RECOMMENDS:

[ ] Department be inducted at status of DRS - I from ___ to ___
[ ] Department be upgraded to status of ___ from ___ to ___
[ ] Department may continue at status of ___ from ___ to ___
[ ] Department be discontinued / not recommended.

(Signatures and Names of Expert Committee Members):

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UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19-05-2015
S.NO.: 14

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Chemistry

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):
peezadagaqmp@yahoocom.in
011-244099; 09906563114 (M)

NAME AND ADDRESS OF UNIVERSITY:
University of Kashmir, Srinagar-190006

PRESENT FACULTY STRENGTH (Total): 09
No. OF PROFESSORS: 03

2(F) STATUS (Y/N): Y
12 (E) STATUS (Y/N): Y
SELF FINANCED DEPTT. (Y/N): N

PRESENT TENURE: FROM 2015 TO 2020
PRESENT PHASE: DRS-I
PRESENT FILE-NO.: ______

(Signatures and Names of University Representatives):

1) ________ 2) ________

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s):
Non-Linear Chemical Dynamics, Surface and Electrochemistry, Natural Product Chemistry

NAME OF CO-ORDINATOR: Prof. C.M. Peezadaga

NAME OF DEPUTY COORDINATOR: Dr. Aijaz Ahmad Dar

FINANCIAL RECOMMENDATIONS:
NON-RECURRING = 70.00
RECURRING = 52.00

NO. OF PROJECT FELLOW(s) = 122.00

TOTAL = 122.00

NAME OF ADVISORY COMMITTEE MEMBERS:

[Signatures and Names of Expert Committee Members]

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS-I from _______ to _______ [ ]

(B) Department be upgraded to status of _______ from _______ to _______ [ ]

(C) Department may continue at status of _______ from _______ to _______ [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19-05-2015
S.NO.: 15

To be filled by representatives of university department:

<table>
<thead>
<tr>
<th>NAME OF DEPARTMENT</th>
<th>Analytical Chemistry</th>
</tr>
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<tbody>
<tr>
<td>CONTACT DETAILS OF DEPARTMENT (E-MAIL &amp; PH):</td>
<td><a href="mailto:sriman55@alam.org.in">sriman55@alam.org.in</a></td>
</tr>
<tr>
<td>NAME AND ADDRESS OF UNIVERSITY</td>
<td>University of Madras, Chennai - 25</td>
</tr>
<tr>
<td>PRESENT FACULTY STRENGTH (Total)</td>
<td>6</td>
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<tr>
<td>2(F) STATUS (Y/N):</td>
<td>Yes</td>
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<td>12 (B) STATUS (Y/N):</td>
<td>Yes</td>
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<td>SELF FINANCED DEPTT. (Y/N):</td>
<td>No</td>
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<td>PRESENT TENURE: FROM</td>
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<td>1</td>
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<td>PRESENT FILE-NUMBER:</td>
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(Signatures and Names of University Representatives):

1) Sriman Narayanan

2) 

To be filled by Expert Committee (RECOMMENDATIONS):

<table>
<thead>
<tr>
<th>THRUST AREA(s)</th>
<th>Graphene based electrodes, polymers, catalysts and coatings</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF CO-ORDINATOR</td>
<td>Prof. S. Sriman Narayanan</td>
</tr>
<tr>
<td>NAME OF DEPUTY COORDINATOR</td>
<td>Dr. K. Ravichandran</td>
</tr>
<tr>
<td>FINANCIAL RECOMMENDATIONS</td>
<td>NON-RECURRING = 60.00</td>
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<tr>
<td>RECURRING = 50.00</td>
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<tr>
<td>NO. OF PROJECT FELLOW(S) =</td>
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<tr>
<td>TOTAL = 110.00 (One Co-Ord + Ten Fello)</td>
<td></td>
</tr>
<tr>
<td>NAME OF ADVISORY COMMITTEE MEMBERS</td>
<td>Prof. A. Samanta</td>
</tr>
<tr>
<td>Prof. M. Palaniandran</td>
<td></td>
</tr>
</tbody>
</table>

THE COMMITTEE STRONGLY RECOMMENDS:

[A] Department be inducted at status of DRS - I from _______ to _______  [ ]

[B] Department be upgraded to status of _______ from _______ to _______  [ ]

[C] Department may continue at status of _______ from _______ to _______  [ ]

[D] Department be discontinued / not recommended.  [ ]

(Signatures and Names of Expert Committee Members):

[Signatures]

[Signatures]

[Signatures]
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE

DATE: 19-5-15

S.NO.: 16

To be filled by representatives of university department:

NAME OF DEPARTMENT: CHEMISTRY

MAHARSHI DAYANAND UNIVERSITY, ANAND PURAM (HYDERA)

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): vsharma@chem.marshri.edu

NAME AND ADDRESS OF UNIVERSITY:

MAHARSHI DAYANAND UNIVERSITY, RAHMATPUR (HYDERA)

PRESENT FACULTY STRENGTH (Total): 17

No. OF PROFESSORS: 11

2(F) STATUS (Y/N): ___ 12 (B) STATUS (Y/N): ___ SELF FINANCED DEPTT. (Y/N): ___

PRESENT TENURE: FROM 2015 TO 2024

PRESENT PHASE: DRS-I

PRESENT FILE NO.: ___

(Signatures and Names of University Representatives):

1) [Signature]

Prof. V.K. Sharma

2) [Signature]

Prof. Rajni Arora

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s):

1) Thermodynamics of Multicomponent Liquid Mixtures

2) Luminescent Materials

NAME OF CO-ORDINATOR:

Prof. V.K. Sharma

NAME OF DEPUTY CO-ORDINATOR:

Prof. Rajni Arora

FINANCIAL RECOMMENDATIONS:

NON-RECURRING = 65.00

RECURRING = 53.00

NO. OF PROJECT FELLOW(s) = ___

TOTAL = 118.00

NAME OF ADVISORY COMMITTEE MEMBERS:

Prof. R.K. Mahajan

Prof. M.S. Singh

THE COMMITTEE STRONGLY RECOMMENDS:

[TICK ANY ONE]

(A) Department be inducted at status of DRS-I from _______ to _______

(B) Department be upgraded to status of _______ from _______ to _______

(C) Department may continue at status of _______ from _______ to _______

(D) Department be discontinued / not recommended.

(Signatures and Names of Expert Committee Members):

[Signature] [Signature] [Signature] 19-5-15
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  DATE: 19-5-2015  S.NO.: 17

To be filled by representatives of university department:

NAME OF DEPARTMENT: Inorganic and Analytical Chemistry

CONTACT DETAILS OF DEPARTMENT (EMAIL & PH): headinorganicanalytical@gmail.com

NAME AND ADDRESS OF UNIVERSITY: Andhra University, Visakhapatnam 530 003

PRESENT FACULTY STRENGTH (Total): 6  NO. OF PROFESSORS: 3

2(F) STATUS (Y/N): Yes  12(?) STATUS (Y/N): Yes  SELF FINANCED DEPTT. (Y/N): No

PRESENT TENURE: FROM _______ TO _______  PRESENT PHASE: _______  PRESENT FILE-NO.: _______

(Signatures and Names of University Representatives):

1) [Signature] (Prof. P. Vani)

2) [Signature] (Dr. K. Basavaiah)

To be filled by Expert Committee (RECOMMENDATIONS):

THRUXT AREA(s): Nanomaterials & Catalysis

Electron Transfer Reactions; Chemical"  speech

NAME OF CO-ORDINATOR: Prof. P. Vani

NAME OF DEPUTY CO-ORDINATOR: Dr. K. Basavaiah

FINANCIAL RECOMMENDATIONS:

NON-RECURRING = 100.00

RECURRING = 36.00

NO. OF PROJECT FELLOW(S) = _______

TOTAL = 136.00

NAME OF ADVISORY COMMITTEE MEMBERS:

1) Prof. H D Jangid

2) Prof. HCP Rao

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS-1 from _______ to _______ [ ]

(B) Department be upgraded to status of _______ from _______ to _______ [ ]

(C) Department may continue at status of _______ from _______ to _______ [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signatures]
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  DATE: 19-5-15  S.NO.: 18

NAME OF DEPARTMENT: Department of Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): RTM Nagpur University, Nagpur
             mmkarade@gmail.com
             0712-250 4293
NAME AND ADDRESS OF UNIVERSITY: RTM Nagpur University, Nagpur - 440033
PRESENT FACULTY STRENGTH (Total): 10  No. OF PROFESSORS: 04
2(F) STATUS (Y/N): Y  12 (B) STATUS (Y/N): Y  SELF FINANCED DEPTT.(Y/N): N
PRESENT TENURE: FROM 2015 TO 2020  PRESENT PHASE: DRS-I  PRESENT FILE-NO.: 

(Signatures and Names of University Representatives):
1) [Signature]
   (Dr. N. N. Karade)
2)

To be filled by Expert Committee (RECOMMENDATIONS):
THRUSt AREa(s):
1. Synthesis of Biologically Active Compounds
2. Development of Advanced Materials

NAME OF CO-ORDINATOR: Dr. N. N. Karade

NAME OF DEPUTY CO-ORDINATOR: Dr. R. M. Jugade

FINANCIAL RECOMMENDATIONS:
NON-RECURRING = 180, 000
RECURRING = 020, 000
NO. OF PROJECT FELLOW(S) = 
TOTAL = 120, 000

NAME OF ADVISORY COMMITTEE MEMBERS:
1) D.K. Raval, Savarbjit Kaul Univ
2) B.K. Karkik, Univ. of Mumb

THE COMMITTEE STRONGLY RECOMMENDS:

[ ] Department be inducted at status of DRS-I from __________ to __________
[ ] Department be upgraded to status of __________ from __________ to __________
[ ] Department may continue at status of __________ from __________ to __________
[ ] Department be discontinued / not recommended.

(Signatures and Names of Expert Committee Members):
[Signature]  [Signature]  [Signature]  (19-5-15)
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19/05/2015
S.NO.: 19

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): clasn@ravenshawuniversity.ac.in
NAME AND ADDRESS OF UNIVERSITY: Ravenshaw University, College Square
City: Cuttack-03
PRESENCE FACULTY STRENGTH (Total): 11
No. OF PROFESSORS: 01
2(F) STATUS (Y/N): Y
12 (F) STATUS (Y/N): Y
SELF FINANCED DEPTT. (Y/N): —
PRESENT TENURE: FROM 2015 TO —
PRESENT PHASE: —
PRESENT FILE NO.: —

(Signatures and Names of University Representatives):
1) [Signature] 19/5/2015
   [Name]
2) [Signature] 20/5/2015
   [Name]

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s):
   Material Chemistry & Catalysis
   Synthetic Organic/inorganic and Organometallic Chemistry
   Prof. N. Das, Professor of Chemistry
   Prof. S. Das, Reader in Chemistry

NAME OF CO-ORDINATOR:

NAME OF DEPUTY COORDINATOR:

FINANCIAL RECOMMENDATIONS:
   NON-RECURRING =
   RECURRING =
   NO. OF PROJECT FELLOW(S) =
   TOTAL =

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTE STRONGLY RECOMMENDS:
   [TICK ANY ONE]
   (A) Department be inducted at status of DRS - I from to [ ]
   (B) Department be upgraded to status of from to [ ]
   (C) Department may continue at status of from to [ ]
   (D) Department be discontinued [not recommended] [ ]

(Signatures and Names of Expert Committee Members):

[Signature] 19/5/15
[Signature] 19/5/15
[Signature] 19/5/15
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19.5.2015
S.NO.: 20

To be filled by representatives of university departments:

NAME OF DEPARTMENT: CHEMISTRY
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):
NAME AND ADDRESS OF UNIVERSITY: Tamil Nadu
PRESENT FACULTY STRENGTH (Total): 7
2(F) STATUS (Y/N): Y
12 (E) STATUS (Y/N): Y
SELF FINANCED DEPTT. (Y/N): N
PRESENT TENURE: FROM 2015 TO ____________ PRESENT PHASE: DRS-I
PRESENT FILE NO.: 54-2014-71

(Signatures and Names of University Representatives):

1) ____________ 2) ____________
(Dr. V. Raj) (__________)

To be filled by Expert Committee (RECOMMENDATIONS):

THRUAT AREA(s): Nanotechnology, coordination chemistry, and biomedical nanotechnology

NAME OF CO-ORDINATOR: Prof. V. Raj
NAME OF DEPUTY CO-ORDINATOR: Dr. D. Roppi

FINANCIAL RECOMMENDATIONS:
NON-RECURRING = Rs. 90,000 lakhs
RECURRING = Rs. 2,000 lakhs
NO. OF PROJECT FELLOW(s) = 2 (actual)
TOTAL = Rs. 112,000 lakhs + 2 PEs

NAME OF ADVISORY COMMITTEE MEMBERS:
Prof. Tias Jana, Cheng, Uweiff, Hyderabad
Prof. Suresh Babu, Chem, Bengaluru

THE COMMITTEE STRONGLY RECOMMENDS:
(A) Department be inducted at status of DRS-I from _________ to _________ [ ]
(B) Department be upgraded to status of _________ from _________ to _________ [ ]
(C) Department may continue at status of _________ from _________ to _________ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

(_________) (_________)
Kalpagram 19.5.2015
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19.5.15
S.NO.: 2021

To be filled by representatives of university department:

NAME OF DEPARTMENT: Chemistry
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): 09487999612, HodChemistry@yahoo.co.in
NAME AND ADDRESS OF UNIVERSITY: Manonmaniam Sundaranar University, Tirunelveli, Tamil Nadu
NO. OF PROFESSORS:

2(F) STATUS (Y/N): Y
12 (D) STATUS (Y/N): Y
SELF FINANCED DEPTT. (Y/N): N

PRESENT TENURE: FROM 2015 TO 2020
PRESENT PHASE: I
PRESENT FILE-NO.: SAP-E:
SAP-152-2014-196

(Signatures and Names of University Representatives):
1) [Signature] (Dr. C. Kannan)
2) [Signature]

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSTR AREA(s): Faculty Strength is not adequate; the faculty members will be active in research. The department cannot apply for support.
NAME OF CO-ORDINATOR:
NAME OF DEPUTY CO-ORDINATOR:
FINANCIAL RECOMMENDATIONS: NON-RECURRING

NO. OF PROJECT FELLOW(S) =
TOTAL =

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS - I from to [ ]
(B) Department be upgraded to status of from to [ ]
(C) Department may continue at status of from to [ ]
(D) Department be discontinued / not recommended. [V]

(Signatures and Names of Expert Committee Members):

[Dilapidated Signature]

(3/5/2015)
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 17-5-2015
S.NO.: 29

To be filled by representatives of university department:

NAME OF DEPARTMENT: Department of Hindi, University of Hyderabad
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): Head, Hindi, uohyd.ac.in. E-mail: head.hindi@uohyd.ac.in. Mobile: 9177542280
NAME AND ADDRESS OF UNIVERSITY: University of Hyderabad, Hyderabad - 500 046
PRESENT FACULTY STRENGTH (Total): 12
2(F) STATUS (Y/N): Yes
12 (B) STATUS (Y/N): Yes
SELF FINANCED DEPT. (Y/N): No

PRESENT TENURE: FROM TO PRESENT PHASE: PRESENT FILE-NO.: 

(Signatures and Names of University Representatives):
1) Prof. R. C. SARRAJU
2) Prof. S. C. CHATURVEDI

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): 

NAME OF CO-ORDINATOR: 

NAME OF DEPUTY COORDINATOR: 

FINANCIAL RECOMMENDATIONS: NON-RECURRING = 
RECURRING = 
NO. OF PROJECT FELLOW(s) = 
TOTAL = 

NAME OF ADVISORY COMMITTEE MEMBERS: 

THE COMMITTEE STRONGLY RECOMMENDS: [TICK ANY ONE]
(A) Department be inducted at status of DRS-I from to [ ]
(B) Department be upgraded to status of from to [ ]
(C) Department may continue at status of from to [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):
UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE                      DATE: 9/5/15                      S.NO.: 23

NAME OF DEPARTMENT: Karnataka

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):

NAME AND ADDRESS OF UNIVERSITY: Karnataka University Dharwad

PRESENT FACULTY STRENGTH (Total): 07 No. OF PROFESSORS: 05

2(F) STATUS (Y/N): -

12 (2) STATUS (Y/N): 1996 SELF FINANCED DEPTT. (Y/N): -


(Signatures and Names of University Representatives):
1) Dr. CG Hajirewala
2) SS Prasad

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s):

NAME OF CO-ORDINATOR:

NAME OF DEPUTY CO-ORDINATOR:

FINANCIAL RECOMMENDATIONS
NON-RECURRING =
RECURRING =
NO. OF PROJECT FELLOW(S) =
TOTAL =

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTEE STRONGLY RECOMMENDS:

(TICK ANY ONE)

(A) Department be inducted at status of DRS-I from ___ to ___ [ ]

(B) Department be upgraded to status of ___ from ___ to ___ [ ]

(C) Department may continue at status of ___ from ___ to ___ [ ]

(D) Department be discontinued / not recommended. [√]

(Signatures and Names of Expert Committee Members):

T.S. Satyanath
1905 2015

Mahesh Chintama
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION/REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE  DATE: 19/05/15  S.NO.: 24

To be filled by representatives of university department:

| NAME OF DEPARTMENT | SVP INSTITUTE OF KANNADE STUDIES |
| CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH.) | KANNADA@MANGALORE UNIVERSITY, AC.IN 0824-2289360 |
| NAME AND ADDRESS OF UNIVERSITY | MANGALORE UNIVERSITY, KARNATAKA |
| PRESENT FACULTY STRENGTH (Total) | 6  No. OF PROFESSORS: 5 |
| 2(F) STATUS (Y/N): YES  12 (B) STATUS (Y/N): YES  SELF FINANCED DEPTT.(Y/N): NO |
| PRESENT TENURE: FROM 2015 TO 2020  PRESENT PHASE: FRESH  PRESENT FILE-NO.: |

(Signatures and Names of University Representatives):
1)  
   DR. SABIHA  
2)  

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSTR AREA(s): CULTURAL STUDIES AND DOCUMENTATION

| NAME OF CO-ORDINATOR | DR. SABIHA |
| NAME OF DEPUTY CO-ORDINATOR | DR. B. SHIVARAMA SHETTY |
| FINANCIAL RECOMMENDATIONS | NON-RECURRING = 800000 |
|  | RECURRING = 290000 |
| NO. OF PROJECT FELLOW(s) = ONE ONLY |
| TOTAL = 2900000 + ACTUALS |

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS-I from 2016 to 2021  [✓]

(B) Department be upgraded to status of  from  to  [ ]

(C) Department may continue at status of  from  to  [ ]

(D) Department be discontinued / not recommended.  [ ]

(Signatures and Names of Expert Committee Members):

19/05/2015
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)
VENUE : UGC OFFICE DATE : 19/05/2015 S.NO.: 25

To be filled by representatives of university department:

NAME OF DEPARTMENT : dept. of Law, Osmania University
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH) : vishnu.law14@yahoo.com
NAME AND ADDRESS OF UNIVERSITY : Osmania University, Hyderabad - 500007
PRESENT FACULTY STRENGTH (Total) : 14 No. OF PROFESSORS: 7
2(F) STATUS (Y/N): YES 12 (B) STATUS (Y/N): YES SELF FINANCED DEPTT.(Y/N): NO
PRESENT TENURE: FROM 2015 TO 2020 PRESENT PHASE: I PRESENT FILE-NO.: 1/12015
(Signatures and Names of University Representatives):
1) (Prof. Y. Vishnu Priya)
2) (Prof. C.B. Dwarakanath)

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): Health laws - socio legal aspects of emergency in India including issues related to human rights.

NAME OF CO-ORDINATOR : Prof. Y. Vishnu Priya, H.O.D.
NAME OF DEPUTY COORDINATOR : Prof. C.B. Dwarakanath
FINANCIAL RECOMMENDATIONS
: NON-RECURRING = Rs. 15.00 lacs
: RECURRING = Rs. 50.00 lacs
NO. OF PROJECT FELLOW(S) = NIL
TOTAL = Rs. 65.00 lacs (Sixty Five Lacs only)

NAME OF ADVISORY COMMITTEE MEMBERS:
1) Prof. Deenan Saxena, V.C.
   National Law University, Jharkhat
2) Prof. Srikant Deshmukh, V.C.
   National Law University, Cuttack

THE COMMITTEE STRONGLY RECOMMENDS:
(A) Department be inducted at status of DRS - I from ______ to ______ [✓]
(B) Department be upgraded to status of ______ from ______ to ______ [ ]
(C) Department may continue at status of ______ from ______ to ______ [ ]
(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):
[Signature] (Prof. Y. Vishnu Priya) ( )
[Signature] (Prof. C.B. Dwarakanath) ( )
[Signature] (Prof. Deenan Saxena) ( )
[Signature] (Prof. Srikant Deshmukh) ( )
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19/05/2015
S.NO.: 26

To be filled by representatives of university department:

NAME OF DEPARTMENT: School of Physical Education, DAV, Indore
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): yadavshrawya@rediffmail.com
NAME AND ADDRESS OF UNIVERSITY: Devi Ahilya University, Indore - 452001
RNT Marg
PRESENT FACULTY STRENGTH (Total): 07
No. OF PROFESSORS: 04
2(F) STATUS (Y/N): Yes
12 (B) STATUS (Y/N): Yes
SELF FINANCED DEPTT. (Y/N): No
PRESENT TENURE: FROM 2015 TO 2020
PRESEN T PHASE: I
PRESENT FILE-N0.: (Circuit)

(Signatures and Names of University Representatives):

1) [Signature]
   (Prof. S.K. Yadav)
2) [Signature]
   (Dr. Vivek B. Sathe)
3) [Signature]
   (Prof. Ajay Kumar)

To be filled by Expert Committee (RECOMMENDATIONS):

THREAT AREA(s):
1) Evaluation techniques in physical education and sport coaching
2) Sports psychology
3) Scientific and biological aspects of coaching and training
   Sports physiology and biochemistry
   Prof. S.K. Yadav
   Prof. Deepak Mehta

NAME OF CO-ORDINATOR
NAME OF DEPUTY CO-ORDINATOR

FINANCIAL RECOMMENDATIONS:
NON-RECURRING = 55 LAKHS
RECURRING = 41 LAKHS
NO. OF PROJECT FELLOW(S) = NIL
TOTAL = 96 LAKHS

NAME OF ADVISORY COMMITTEE MEMBERS:
Prof. Vivek Pandey, HOD, CUIPE, Guwahati
Prof. Alka Nayak, Dept. of Physical Education,
Rani Durgavati Women's University

THE COMMITTEE STRONGLY RECOMMENDS:

(A) Department be inducted at status of DRS - I from to [ ] [ ] DRS - I

(B) Department be upgraded to status of from to [ ]

(C) Department may continue at status of from to [ ]

(D) Department be discontinued / not recommended. [ ]

(Signatures and Names of Expert Committee Members):

[Signature]
(Prof. B.C. Kapri)

[Signature]
(Prof. Ajay Kumar)
UNIVERSITY GRANTS COMMISSION
RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
(SUBJECT TO APPROVAL OF THE COMMISSION)

VENUE: UGC OFFICE
DATE: 19/5/2015
S.NO.: 27

To be filled by representatives of university department:

NAME OF DEPARTMENT: Physical Education
CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH): gae.phy.edu@gmail.com 09442324126
NAME AND ADDRESS OF UNIVERSITY: Gandhi University, Gwalior - 474010
PRESENT FACULTY STRENGTH (Total): 05
No. OF PROFESSORS: 01
2(F) STATUS (Y/N): ______
12 (R) STATUS (Y/N): ✓ SELF FINANCED DEPTT. (Y/N): N
PRESENT TENURE: FROM 2004 TO 2014
PRESENT PHASE: I PRESENT FILE-NO.: __________

(Signatures and Names of University Representatives):
1) __________
2) __________

To be filled by Expert Committee (RECOMMENDATIONS):

THRUST AREA(s): __________

NAME OF CO-ORDINATOR: ________________________________

NAME OF DEPUTY COORDINATOR: ________________________________

FINANCIAL RECOMMENDATIONS: NON-RECURRING = __________
RECURRING = __________
NO. OF PROJECT FELLOW(s) = __________
TOTAL = __________

NAME OF ADVISORY COMMITTEE MEMBERS: ________________________________

______________________________

THE COMMITTEE STRONGLY RECOMMENDS: [TICK ANY ONE]
(A) Department be inducted at status of DRS - I from ______ to ______ [ ]
(B) Department be upgraded to status of ______ from ______ to ______ [ ]
(C) Department may continue at status of ______ from ______ to ______ [ ]
(D) Department be discontinued / not recommended. [ ✓ ]

(Signatures and Names of Expert Committee Members):
Dr. L. Kumar [19/5/91]
P. S. P. C. K. [19/5/91]
De Anil Kumar Kallol [ ]
**UNIVERSITY GRANTS COMMISSION**

**RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW**

*(SUBJECT TO APPROVAL OF THE COMMISSION)*

**VENUE : UGC OFFICE**

**DATE : 19-5-2015**

**S.NO. : 28**

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**NAME OF DEPARTMENT :** Political Science

**CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH) :** MBA(CAM)@JMI.AC.IN, 011-26981917

**NAME AND ADDRESS OF UNIVERSITY :** Jamia Millia Islamia, New Delhi - 25

**PRESENT FACULTY STRENGTH (Total) :** 14

**No. OF PROFESSORS :** 8

**2(F) STATUS (Y/N) :** No

**12 (B) STATUS (Y/N) :** Yes

**SELF FINANCED DEPTT. (Y/N) :** No

**PRESENT TENURE : FROM 2015 TO 2020**

**PRESENT PHASE :** 1

**PRESENT FILE-NO. :**

---

(Signatures and Names of University Representatives):

1) Prof. Raniki Basu

2) Dr. Sanjib Sebastian

---

**To be filled by Expert Committee (RECOMMENDATIONS):**

**THRUST AREA(s) :**

1. Citizen Engagement and Good Governance
2. Human Security and Millennium Development Goals
3. Anti-corruption
4. Gender

**NAME OF CO-ORDINATOR :** Prof. Balamandhir (Deputy Dean)

**NAME OF DEPUTY COORDINATOR :** Prof. Raniki Basu

**FINANCIAL RECOMMENDATIONS :**

- Recurring = 12.20 Lakh
- Non-Recurring = 64.57 Lakh

**NO. OF PROJECT FELLOW(s) :** 1

**TOTAL = 76.70 Lakh + 1**

**NAME OF ADVISORY COMMITTEE MEMBERS :**

- Dr. Jagpal Singh, IIT, Delhi
- Dr. Sunil Prasad, IIT, Kanpur

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**THE COMMITTEE STRONGLY RECOMMENDS :**

(A) Department be inducted at status of **DRS - I** from _ _ to _ _ [ ✔ ]

(B) Department be upgraded to status of _ _ from _ _ to _ _ [ ]

(C) Department may continue at status of _ _ from _ _ to _ _ [ ]

(D) Department be discontinued / not recommended. [ ]

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(Signatures and Names of Expert Committee Members):

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UNIVERSITY GRANTS COMMISSION

RECOMMENDATIONS OF THE EXPERT COMMITTEE FOR FRESH INDUCTION / REVIEW
SUBJECT TO APPROVAL OF THE COMMISSION

VENUE : UGC OFFICE
DATE : 19 May 2015
S.NO.: 29

To be filled by representatives of university department:

NAME OF DEPARTMENT:

CONTACT DETAILS OF DEPARTMENT (E-MAIL & PH):

NAME AND ADDRESS OF UNIVERSITY:

PRESENT FACULTY STRENGTH (Total):

No. OF PROFESSORS:

2(F) STATUS (Y/N):

12 (F) STATUS (Y/N):

SELF FINANCED DEPTT. (Y/N): N

PRESENT TENURE: FROM 2015 TO 2020

PRESENT PHASE: CAS-I

PRESENT FILE NO. 6.5/2010 (SAP-III)

(Signatures and Names of University Representatives):

1) [Signature] UJJWAL KUMAR SINGH

2) [Signature] N. S. SANKAR

3) [Signature] ASHOK ACHARYA

To be filled by Expert Committee (RECOMMENDATIONS):

THRUSS AREA(s):

FINANCIAL RECOMMENDATIONS:

RECURRING

NO. OF PROJECT FELLOW(s) =

TOTAL

NAME OF ADVISORY COMMITTEE MEMBERS:

THE COMMITTEE STRONGLY RECOMMENDS:

(TICK ANY ONE)

(A) Department be inducted at status of DRS-I from ___ to ___

(B) Department be upgraded to status of ___ from ___ to ___

(C) Department may continue at status of CAS-I to ___ from ___ to ___

(D) Department be discontinued / not recommended.

(Signatures and Names of Expert Committee Members):

[Signature]

[Signature]