

E14

Member of Association of Indian Universities & Approved by UGC (Govt. of India) under 2(f) & 12(B)

FORTNIGHTLY ATTENDANCE ANALYSIS OF HOSTELLERS

ATTENDANCE EVAULATION FORM TO BE FILLED (FORTNIGHTLY) BY FACULTY ADVISOR

Name of Student: _ Duration:					Year:		Branch		
		to		Room No.	Hostel Name & No.:		Name of		
S. No.	Attendance for Current Half	Cumulative Attendance	+/- Change From Last Cumulative	Reasons for if Decline in Attendance	Room Cleanliness	Behavior	Remarks By Faculty Advisor	Remarks by Coordinator	Remarks by Chief Coordinator
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

Remarks: Room Cleanliness: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor

Behaviour: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor



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REPORTING OF WEEKLY STUDENTS INTERACTION

STUDENT INTERACTION FORM TO BE FILLED (EVERY WEEK) BY FACULTY ADVISOR

Name of	Student:			,	Year:	Branch	Branch					
Duration	ı: to		Room No		Hostel Name & No.:	Name of F	aculty Advisor					
S.No –	Rat	(0-5)	Total — Grade	Problems Faced	Remedial Steps	Remark by Faculty	Remark by Coordinator					
5.110	Class Notes Completed	Tut. Completed Till Date	Assignment / Lab Report	(Out Of 15)	Troblems Faccu	Taken/Suggestion Given	Advisor with Date	with Date				

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor



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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

REPORT BY FACULTY ADVISORS (TO BE SUBMITTED FORTNIGHTLY TO ACADEMIC ADMINISTRATOR)

Name of	f Faculty Advisor	Hostel Name:	. Duration:	to
	•			
1.	% Students having Adequate Attendance (More than 75%):			

2. % Students having Adequate Rating (More than 10 out of 15):

S.No	Name of Students who have low Attendance (last 10 students in order)	Class and Year	Room No.	S.No	Name of Students who have Academic grade less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor





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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

HOSTEL-WISE REPORT BY FACULTY ADVISOR (TO BE SUBMITTED FORTNIGHTLY TO THE DEAN)

Duration	:to			Name:	Date		
S.No	Name of Students who have low Attendance (last 10 students in order)	Class and Year	Room No.	S.No	Name of Students who have Academic grade less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			
Remarks	s by Dean (Weekly)					Signature of	Faculty Advisor with Date





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WEEKLY REPORT BY WARDEN

Duration	ı:	to			Hostel Nan	ne:			Date	
S.No	Room Hygiene 5/4/3/2/1		Behavior 5/4/3/2/1		Attendance & Regularity Y/N		Discipline Good/Bad		Habits Good/Bad	
5.110	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										
Remark	ks By Warden									
Remark	ks By Dean									

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor