

University of Swat

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APPLICATION FORM FOR AFFILIATION OF DEGREE PROGRAM

Note: Please answer every question clearly and fully. Tick mark $(\sqrt{})$ in box where applicable and Write N.A. where the column is not relevant. Attach additional sheet(s) if required.

1. AFFILIATION:
i. Affiliation desired in the discipline(s)/ subject(s):
ii. Previous affiliation in the discipline(s):
iii. Mode of affiliation:
iv. Affiliation processing fee details:
v. Inspection fee details:
2. <u>DETAIL OF INSTITUTION</u> : (Attach map/ plane of the building of the institution)
i. Name of the Institution:
ii. Address of the Institution/ exact location:
iii. Year of establishment:
iv. Objective(s) of establishment:
v. Mission Statement:
vi. Vision Statement:
vii. Name of the Chief Executive:
viii. Qualification of the Chief Executive:
ix. Contact Nos. (Phone / Mobile):
x. Fax No
xi. Website address:
xii.Email id:

3. STAFF DETAILS:

(a) Teaching Staff

i. Number of male staff:
ii. Number of female staff:
iii. Number of Professors:
iv. Qualification of Professors: (Attach Details)
v. Number of Associate Professors:
vi. Qualification of Associate Professors: (Attach Details)
vii. Number of Assistant Professors:
viii. Qualification of Assistant Professors:(Attach Details)
ix. Number of lecturers:
x. Qualification of Lecturers: (Attach Details)
xi. Number of visiting Professors:
xii.Qualification of visiting Professors:(Attach Details)
xiii. Numbers of part time professors, Associate Professors, Assistant Professors, Lecturers:
xiv. Salary details of Professor, Associate Professor, Assistant Professor and Lecturer:
xv.Mode of Selection of teaching staff:
xv.Mode of Selection of teaching staff:xvi. Teaching staff selection criteria:
xvi. Teaching staff selection criteria:

	i. Number of library staff:
	ii. Qualification:
	iii. Other relevant staff :
	Other support Staff:
	iv. Number of Clerical staff:
	v. Designation(s):
	a
	b
4.	STUDENTS DETAILS:
	i. Total number of students enrolled in the institution:
	ii. Enrollment of students level-wise:
	a)
	b)
	c)
	d)
4	DOADD OF COVERNORS.
4.	BOARD OF GOVERNORS:
	If present, attach list of members of the Board of Governors.
5.	PHYSICAL FACILITIES:
	i. Building of the Institution: a. Purpose Built . b. House . c. Otherwise
	ii. Total area:
	iii. Covered Area:
	iv. If rented, period of agreement with the owner: w.e.ftoto

Library Staff:

Class Rooms:

i.	Number of class rooms:							
	Size of class rooms / students Capacity:							
iii.	Cross ventilation in class rooms: a. Yes b. No							
iv.	Electric installation: a. Fan b. A. C							
	c. Light d. Heater e. Others							
٧.	Rostrum/ dice: a. Present b. Not present							
vi.	Number of tablet chairs in each class rooms:							
vii.	Furniture: a. wooden b. Plastic c. Fiber glass							
viii.	Size does white board / black (8'x 4' required):							
Lik	orary:							
i.	Size of Library:							
ii.	Number of text books:							
iii.	Number of general books:							
iv.	Number of reference books:							
٧.	Number of journals/ magazines:							
vi.l	Number of newspapers:							
vii.	Number of study tables/ chairs:							
viii.	Number does shelves for books:							
ix.	Library computerized: a. Yes b.No							
Χ.	Library linked with internet: a. Yes . b. No .							
xi.	Details of gas/ electricity installations in the library:							
Science Laboratories:								
	CHEMISTRY PHYSICS BOTANY ZOOLOGY							
i	i. Size of each lab							
i	ii. Required apparatus/ chemicals/ specimen available :a. Yes b. No							
i	iii. Working tables/ chairs available: a. Yes b. No							
i	iv. Water connection available: a. Yes b. No							
١	v. Electricity/ gas installation available: a. Yes b. No							
١	vi. Exhaust in the lab: a. Yes b. No							

Computer/ IT Lab: (i) Size of the lab: Number of computers: _____ (ii) (iii) Specification of computers: Students ratio vs Computers: _____ (iv) b. No (v) Net working available: a. Yes a. Yes b. No L (vi) Internet facility available: a. Yes b. No (vii) Proper furniture/ fixture available: a. Yes b. No Multimedia: (viii) **Principal Room**: Size (i) Fully furnished/ half furnished / not furnished (ii) Details of Office equipment's / furniture: (iii) Staff Room: (i) Size______ Furnishing details:_____ (ii) a. Yes | | b. No L (iii) Wash room attached: **Student Wash Rooms:** Number of wash rooms: (i) b. No 🗀 (ii) Water supply available:

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(iii)	Electric supply/ light available:	a. Yes	b. No
<u>Play</u>	Ground:		
(i)	Size of the ground:		
(ii)	Distance from the institution:		
<u>Exar</u>	n Hall:	a. Yes	b. No
(i)	Size of the hall:		

Electricity/ gas installation:

Number of chairs in the hall: ______

(ii)

(iii)

b. No

a. Yes

	eminar Hall / Conference Room:		a. Yes		b. No
(i) Size of the conference room	າ:			
(ii) Number of chairs in the con	ference room: _			
(iii) Electricity/ gas instillation in the cor	nference room:	a. Ye	s	b. No
<u>H</u>	ostel Facility:				
(i)	If available for how many students:				
(ii	Number & Size of rooms:				
<u>G</u>	eneral facilities:				
Т	ledical Facilities: a. fast aid box	b. No]	t available [
i.	NCIAL REQUIREMENTS: Bank A/C in the name of institute:	a. Yes			b. No
ii. 	if yes, name of the bank:				
	Amount of andowment funds her hank				
	Amount of endowment funds per bank				
iii. iv. v.	Amount of working capital as per bank Value of tangible assets:	statement:			
iv. v. <u>EE S</u>	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details)	statement:			
iv. v. <u>E S</u> (/	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details)	statement:			
iv. v. <u>E S</u> (/ DCU	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details) MENTATION: General stock register:	statement:		b. No	
iv. v. (# G L:	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details) MENTATION: eneral stock register: ab(s) stock register(s):	a. Yes		b. No b. No	
iv. v. (/ DCU G Li	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details) MENTATION: deneral stock register: ab(s) stock register(s): dibrary stock register/ Accession register:	a. Yes a. Yes a. Yes a. Yes		b. No b. No b. No	
iv. v. EES (# GL: A	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details) MENTATION: eneral stock register: ab(s) stock register(s): ibrary stock register/ Accession register: dmission with drawl register:	a. Yes a. Yes a. Yes a. Yes a. Yes		b. No b. No b. No b. No	
iv. v. (# CCU GCU A C	Amount of working capital as per bank Value of tangible assets: TRUCTURE: Attach Details) MENTATION: deneral stock register: ab(s) stock register(s): dibrary stock register/ Accession register:	a. Yes a. Yes a. Yes a. Yes		b. No b. No b. No	

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Signature and Stamp of the Chief Executive:

10. <u>C</u>	DDE O	F CONDUCT FOR STUDENTS:	a. Yes		b. No		
	(i)	Medium of instruction:	a. Yes		b. No		
	(i)	Duration of teaching time: from	n:	AM	to:		_PM
	(ii)	Co- curricular activities if any:					
44 0							
11. <u>G</u>	ENER.						
		ocieties:					
	ii. Ma	agazines:					
12. <u>Al</u>	NY OTI	HER / REMARKS BY THE HEAD O	F INSTITUTI	ON:			
Princip	oal Nar	me:	Of	fice Stamp)		-
Qualif	ication	:	Da	ate:			_
Signat	ture:						
<u>Impoi</u>	tant N	lote:					
i. ii. iii. iv. v.	inform Five of binde Office Attac Attac Attac the in	se fill in all the relevant information anation / evidence the response will be copies of the application form along a form. All copies of application for / Chief Executive Officer. In admission policy of the institution. In policy of the institution for quality and the details of sources of income to mustitution. The first institution for quality and the details of sources of income to mustitution. The first institution for quality and the details of sources of income to mustitution.	pe considered by with support form should by assurance and neet the recur	I invalid ted docum be attested d students rring and c	ents should by the C supervisio developmer	d be pro Chief Co n. ntal exp	ovided in ontrolling enses of

Signature and Stamp of the Chief Executive:

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