\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format



# All India Council for Technical Education (A Statutory body under Ministry of HRD, Govt. of India) 7th Floor, Chandralok Building, Janpath, New Delhi- 110 001

PHONE: 23724151/52/53/54/55/56/57 FAX: 011-23724183 www.aicte-India.org

Guidelines on submission of documents along with print copy of application/s for approvals

1 Setting up new Institutes/ Adding new Technical Program/s

Refer annexure 17.

Ensure that all copies are in A4 size only (Land documents/building drawing may be up to A0 sizes) Ensure that all copies are attested.

Please number all copies of documents as given below,

Your Regional	Your Application	Annexure	Sr number as in	Page number
office code	ld	Number	annexure 17	(3 digits)

e.g. consider numbering an affidavit (comprising of 2 pages), which is sr. no. 2 in annexure 17.1,

WRO	1-11234567	17.10	02	001
WRO	1-11234567	17.10	02	002

The number so generated WRO1-1123456717.1002001 should be written on top of each page with bold pen as shown below

W R O 1 - 1 1 2 3 4 5 6 7 1 7 . 1 0 0 2 0 0
---

Please do not bind or staple, as all pages are going to be scanned. All pages should be knotted on the left hand top corner as shown below. This set of knotted documents should be submitted in a "Flap Folder".

Date of Signature	Seal of Institute	Name & s Director	signature of /Principal	
5/20/2014				Page 1 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format



Provide index page on top of set of documents as follows,

Region - WRO		Application ID: 1	-11234567
Annexure Number	Sr number as in annexure 17 (2 digits)of documents which are being submitted now	Page nur	nber (3 digits)
From	То		
17.10	02	001	002
17.10	03	001	005

Guidelines on submission of documents along with print copy of application/s for approvals

- 2 § Extension of approval to existing Institution
  - Increase / reduction in intake in existing courses §
  - § Adding course/s in existing program
  - Closure of program / course §
  - § Mandatory provision of supernumerary seats for TFW
  - Introducing / continuing / discontinuing supernumerary seats for PIO §
  - § Introducing / continuing / discontinuing seats for sons/daughters of NRIs
  - Change of name of the Institute §
  - Conversion of Women's Institution into Co-Ed Institution §
  - Introducing a Foreign Collaboration with an AICTE approved Indian Institution §

Refer annexure 18.

### Ensure that all copies are in A4 size only (Land documents/building drawing may be up to A0 sizes)

Ensure that all copies are attested.

Date of Signature	S	Seal of Institute	Name & signature of Director /Principal	
5/20/2014				Page 2 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Please number all copies of documents as given below,

Your Regional	Your Application	Annexure	Sr number as in	Page number
office code	ld	Number	annexure 18	(3 digits)

e.g. consider numb	ering an affidavit (co	mprising of 2 pages	s), which is sr. no. 2 in	annexure 18.1,
WRO	1-11234567	18.10	02	001
WRO	1-11234567	18.10	02	002

The number so generated WRO1-1123456718.1002001 should be written on top of each page with bold pen as shown below,

W R O 1 - 1 1 2 3 4 5 6 7 1 8 . 1 0 0 2 0 1
---

Please do not bind or staple, as all pages are going to be scanned. All pages should be knotted on the left hand top corner as shown below. This set of knotted documents should be submitted in a "Flap Folder".



Provide index page on top of set of documents as follows,

Region - WRC	)	Application ID :	1-11234567
Annexure Number	Sr number as in annexure 18 (2 digits)of documents which a submitted now	re being	Page number (3 digits)
From	То		
18.10	02	001	002
18.10	03	001	005

Regional Office codes :

Eastern ERO	North- NWR West	South Central	SCR	South- SWR West	
-------------	--------------------	------------------	-----	--------------------	--

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>3</b> of <b>24</b>

5/20/2014

Please submit the hard copy of this Report to Regional Officer only if Application status is Submitted to RO

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Northern	NRO	Central	CRO	Guwahati Camp Office	ERO	Southern	SRO
Western	WRO						

### **Important Note for Payments:**

- "It has been observed that some of the institutions applying to AICTE for the approval process are а submitting hand filled, over written payment slips (challan) along with the Cheque / Payorder at the collecting bank branches. We wish to reiterate that payment is to be deposited strictly as per Payment process explained in User manual uploaded on this website. AICTE shall not be able to update any such payment record as hand filled challan shall not have the corresponding Institution details at AICTE end for payment status updation, which will affect institution approval process.
- Institutions which do not follow the AICTE guidelines shall be responsible for rejection/ delay in b updation of their application and neither AICTE nor the Collecting Bank shall be responsible for any such consequence."
- No DD / Cheque / PO to be sent to either Head Office / Regional Office of AICTE. Such payments С shall not be processed and the applications are liable to be rejected.

Date of Signature	Seal of Institute	& signature of or /Principal
5/20/2014		Page <b>4</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Permanent Institute Id	1-6906301
Current Application Number	1-2012898335
Application Number of 13-14	1-1454845022
AICTE File No.	06/03/UP/MBA/051
Application Type	Extension-Expansion-Closure
Permanent Institute Id ,as entered by Existing	Not Applicable
Institute applying for New Programme	
Do you want to change the Affiliating Board	Υ
Enter name of the new Affiliating Board	Uttar Pradesh Technical University, Lucknow

#### **Institute Details**

Description	Details provided by Institute
Name of the Institution	JAIPURIA INSTITUTE OF MANAGEMENT
Address	SECTOR 14-C
	VASUNDHRA
Town/Village	GHAZIABAD
State/UT	Uttar Pradesh
District	GHAZIABAD
Pin	201012
AICTE Region	Northern
STD code	120
Land Phone number	4550100
Cell Number	9560050000
FAX Number	2882804
Email	directorjim@jaipuria.net
Alternate Email	anilyashika@gmail.com
Website	www.jaipuria.edu.in/jim
Institute Type	Unaided - Private
Women Institute	N
Minority Institute	N
Type Of Minority	Data Not Provided by the Institute
Name of the Minority	NA
PAN	NOPANGIVEN
Primary Bank Account number	636010100006354
Bank Name	AXIS BANK
IFSC Number	UTIB0000636
Any Unaided Course?	N
Approval Year of First Course	2001
Date of First Approval by AICTE	06/27/2001
Date of thist Approval by AICTE	
Total number of teaching faculty in the Institute for	25

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 5 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

	1
all Programmes:	
Number of teaching faculty approved by 25	
University/Government?:	
Are all approved teaching faculty being paid as per Y	
VI pay commission?:	
Are all the teaching faculty, as per AICTE Y	
qualification?:	
Do you wish to apply closure of Institute?: N	
Percentage Grant Received from Government?: 0	
	manent Site
Site/Temporary Site?:	
Whether mandatory disclosure is uploaded in Y	
Institute's website?:	
Whether the Institute following ICAI(Institute of Y	
Chartered Accountants of India) Accounting	
Formats?:	
Fees to be charged, Reservation policy, Admission Y	
policy and Document retention policy are duly	
approved by State Govt?:	
Fees to be charged, Reservation policy, Admission Y	
policy and Document retention policy are duly	
approved by Affiliating Board?:	
Fees to be charged, Reservation policy, Admission Y	
policy and Document retention policy are uploaded	
in Institute's Website?:	
List of faculty and data uploaded on the institute Y	
web portal	
Courses/Approved Intake displayed Y	
at the entrance of the institute?	

### **Application Details**

Change of Institute Site	N
Increase in Intake / Application for New Course	N
Closure of Course / Reduction in Intake	N
PIO	N
NRI	N
Change of name of the Institute	N
Conversion of Women's Institution into Co-Ed	Ν
Institution	
Introducing a Foreign Collaboration with an AICTE	N
approved Indian Institution	
Introduction of Second Shift / Part Time Course	Ν
Introduction of New Dual/Integrated Course	N

Date of Signature	Seal of Instit	ite	Name & signature of Director /Principal	
5/20/2014				Page <b>6</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

#### **Payment Details**

Payment Id	204369481
Mode of Payment	CIB/Retail Banking(Other Bank)
Bank Transaction Id	106599595
TPSL Transaction Id	105184035
Receipt Flag	Υ
Amount Received	100000
Transaction Date	05/20/2014

### **Details about Parent Organization**

Name of the Parent organization	SETH ANANDRAM JAIPURIA EDUCATION SOCEITY
Address	SECTOR 14-C, VASUNDHARA, GHAZIABAD-201012
Town/Village	GHAZIABAD
State/UT	Uttar Pradesh
District	GHAZIABAD
Pin	201012
Website	www.jaipuria.edu.in/jim
Type of the organization	Society
Registered with	REGISTRAR OF SOCIETY (U.P)
Registration date	07/01/1981

#### **Details about Contact Person**

Title	Dr.
First Name	DAVIENDER
Last Name	NARANG
Address	SECTOR 14 C, VASUNDHARA, GHAZIABAD
Town/Village	GHAZIABAD
State/UT	Uttar Pradesh
District	GHAZIABAD
Pin	201012
Designation	DIRECTOR
STD code	120
Land Phone number	4550100
Cell Number	9560050000
FAX Number	2882804
Email	directorjim@jaipuria.net
Alternate Cell Number	9810675880
Alternate Email Address	anilyashika@gmail.com

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 7 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

#### Land Details

Location	Other than Rural					
Northern hilly area	N					
Number of pieces	NA					
Max distance in farthest pieces	NA					
Latitude and Longitude	Latitude - 28, 39, 31 Longitude - 77, 21, 50					
Total area in acres	1.5					
Land registered with	U.P.AWAS VIKAS PARISHAD					
Land registration date	07/09/1999					
Land Use Certificate issued by	N.A.BECAUSE THIS LAND IS EDUCATION LAND					
Land Use Certificate date	02/26/1997					
Land ownership details	Government Lease					
Mortgage details	N					
Purpose of mortgage	NA					

### **Other Land Details**

Sr Num	Land Registratio n No (1)	Date of Registration (2)	Area of Land (3)	Khasra Number (4)	Plot Number/ Survey Number (5)	Land Situate d At(6)	Land Registere d in the name Of(7)	Ownershi p or Govt Lease(8)	Land Use Certificate Issued(9)	Land Use Certificate Issuing Authority (10)
1	4775 & PAGE NO 273/265	07/09/1999	2208 8	14-c	14-C	VASUN DHARA , GHAZI ABAD	SETH ANANDR AM JAIPURIA EDUCATI ON SOCIETY	Governme nt Lease	No	Data Not Provided by the Institute

#### **Other Land Details Contd**

Sr Num	Is the Land Mortgaged(11)	Details of Land If the Land is Mortgaged(12)	Land required at the time of First AICTE approval(In Acres)(13)	Land available at the time of First AICTE approval(In Acres)(14)
1	No	Data Not Provided by the Institute	.5	1.5

#### **Building Details**

Building status	Available
Total built up area planned	0
Total built up area ready	3369

Date of Signature	Seal o	f Institute	Name & signature of Director /Principal	
5/20/2014				Page 8 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Total Instructional area (carpet area) ready in Sqm	1158
Total Administrative area (carpet area) ready in Sqm	611
Total Amenities area (carpet area) ready in Sqm	492
Activities in the building other than AICTE approved courses	NO

### **Other Building Details**

Sr Num	Building Number (1)	Building Name (2)	Sanctioned Built up Area(3)	Constructed Built up area(4)	Approved Carpet Area Instructional(5)	Constructed Carpet Area Instructional(6)	Approved Carpet Area- Adminstrative(7)	Constructed Carpet Area Adminstrative(8)	Approved Carpet Area- Amenities(9)	Constructed Carpet Area Amenities(10)
1	SECT OR 14 C	JAIPU RIA INSTI TUTE OF MANA GEME NT	3369	3369	1158	1158	611	611	492	492

### **Other Building Details Contd**

Sr Num	Total Area Approved (11)	Total Area Constructed (12)	Activities Conducted in the Building (13)	Non AICTE approved courses run in the Building (If Any)(14)	Name of the Building Plan Authority (15)	Building Plan Approval Date (16)	Approval Number(17)
1	3369	3369	MBA PROGRAMME	NIL	U.P.AWAS VIKAS PARISHAD	06/24/2002	638

### **Programme and courses**

Sr Num	Course Unique Id(1)	Programme(2)	Level(3)	Course(4)	Shift(5)	FT/PT (6)	Started In (7)	Applying For(8)	Course duration (9)
1	1- 1454845290	MANAGEMEN T	POST GRADUATE	MASTERS IN BUSINESS ADMINISTRATI ON	1st Shift	FULL TIME	2001	EoA Only	2

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 9 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

### Programme and courses Contd

Sr Num	Course Unique Id (10)	Programme (11)	Course (12)	Current intake (13-14) (13)	Appli ed for intake (14- 15) (14)	Board(15)	NRI (16)	PIO (17)	Foreign collabor ation Request (18)	Accreditatio n status (19)
1	1- 1454845290	MANAGEME NT	MASTER S IN BUSINES S ADMINIS TRATION	180	180	Mahamaya Technical University, Noida	Not interes ted	Not interest ed	Not intereste d	NOT ACCREDITE D

#### **Instructional Area**

Sr Num	Programm e (1)	Level (2)	Building Number (3)	Building Name (4)	Room Type (5)	Room Numbe r (6)	Average Carpet Area(7)	Flooring (8)	Wall & Painting (9)	Elec & lighting (10)	Furniture & Fixtures (11)
1	MANAGEM ENT	POS T GRA DUA TE	Data Not Provide d by the Institut e	JAIPURI A INSTITU TE OF MANAG EMENT	Tutoria I Room	F1	53	Ready	Ready	Ready	Ready
2	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	F11	75	Ready	Ready	Ready	Ready
3	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	F12	66	Ready	Ready	Ready	Ready
4	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Tutoria I Room	F4	42	Ready	Ready	Ready	Ready
5	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Semin ar Hall	F7	136	Ready	Ready	Ready	Ready

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>10</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Sr Num	Programm e (1)	Level (2)	Building Number (3)	Building Name (4)	Room Type (5)	Room Numbe r (6)	Average Carpet Area(7)	Flooring (8)	Wall & Painting (9)	Elec & lighting (10)	Furniture & Fixtures (11)
6	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	F8	66	Ready	Ready	Ready	Ready
7	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	F9	75	Ready	Ready	Ready	Ready
8	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Semin ar Hall	G16	54	Ready	Ready	Ready	Ready
9	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Semin ar Hall	G20	75	Ready	Ready	Ready	Ready
10	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	G21	75	Ready	Ready	Ready	Ready
11	MANAGEM ENT	POS T GRA DUA TE	JIM BLOCK	JAIPURI A INSTITU TE OF MANAG EMENT	Classr oom	G23	75	Ready	Ready	Ready	Ready

#### **Instructional Area Common facilities**

Building Number(1)	Building Name (2)	Room Type (3)	Room Id(4)	Area(5)	Flooring(6)	Wall & Painting (7)	Elec & lighting (8)	Furniture & Fixtures(9)
Data Not Provided by the Institute	Data Not Provided by the Institute	Computer Center	F10G22	196	Ready	Ready	Ready	Ready

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 11 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Building Number(1)	Building Name (2)	Room Type (3)	Room Id(4)	Area(5)	Flooring(6)	Wall & Painting (7)	Elec & lighting (8)	Furniture & Fixtures(9)
Data Not Provided by the Institute	Data Not Provided by the Institute	Libraryℜ ading Room	F5	170	Ready	Ready	Ready	Ready

#### Administrative Area

Sr Num	Building Number (1)	Building Name (2)	Room Type (3)	Room Id (4)	Area (5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & fixtures (9)
1	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	F12A	9	Ready	Ready	Ready	Ready
2	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	F13	15	Ready	Ready	Ready	Ready
3	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	F15	18	Ready	Ready	Ready	Ready
4	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	F17	8	Ready	Ready	Ready	Ready
5	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	F6	76	Ready	Ready	Ready	Ready
6	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	F8A	9	Ready	Ready	Ready	Ready
7	JIM BLOCK	AIPURIA INSTITUTE OF MANAGEM ENT	Principal Directors Office	G1	31	Ready	Ready	Ready	Ready
8	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Placemen t Office	G12	46	Ready	Ready	Ready	Ready

Date of Signature	Seal of I	nstitute	Name & signature of Director /Principal	
5/20/2014				Page <b>12</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Sr Num	Building Number (1)	Building Name (2)	Room Type (3)	Room Id (4)	Area (5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & fixtures (9)
9	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	G13	12	Ready	Ready	Ready	Ready
10	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G14	12	Ready	Ready	Ready	Ready
11	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Exam Control Office	G15	37	Ready	Ready	Ready	Ready
12	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G17	26	Ready	Ready	Ready	Ready
13	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Cabin for Head of Dept	G18	23	Ready	Ready	Ready	Ready
14	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G19	34	Ready	Ready	Ready	Ready
15	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Departme nt Office	G2	20	Ready	Ready	Ready	Ready
16	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Pantry for Staff	G25	53	Ready	Ready	Ready	Ready
17	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G27	18	Ready	Ready	Ready	Ready
18	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G28	10	Ready	Ready	Ready	Ready
19	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G29	8	Ready	Ready	Ready	Ready

Date of Signature	Seal of	Institute	Name & signature of Director /Principal	
5/20/2014				Page <b>13</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Sr Num	Building Number (1)	Building Name (2)	Room Type (3)	Room Id (4)	Area (5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & fixtures (9)
20	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Board Room	G4	23	Ready	Ready	Ready	Ready
21	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	G5	17	Ready	Ready	Ready	Ready
22	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Maintena nce	G6	11	Ready	Ready	Ready	Ready
23	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Office All Inclusive	G7	6	Ready	Ready	Ready	Ready
24	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Faculty Room	G8	33	Ready	Ready	Ready	Ready
25	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Houseke eping	G9	11	Ready	Ready	Ready	Ready
26	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Central Store	S1	33	Ready	Ready	Ready	Ready
27	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Security	S3	12	Ready	Ready	Ready	Ready

#### **Amenities Area**

Sr Num	Building Number (1)	Building Name (2)	Room type (3)	Room Id (4)	Area(5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & Fixtures(9)
1	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F14	14	Ready	Ready	Ready	Ready

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>14</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Sr Num	Building Number (1)	Building Name (2)	Room type (3)	Room Id (4)	Area(5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & Fixtures(9)
2	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	First aid cum Sick Room	F16	10	Ready	Ready	Ready	Ready
3	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F18	12	Ready	Ready	Ready	Ready
4	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F19	14	Ready	Ready	Ready	Ready
5	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F2	10	Ready	Ready	Ready	Ready
6	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F20	4	Ready	Ready	Ready	Ready
7	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F21	30	Ready	Ready	Ready	Ready
8	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	F3	4	Ready	Ready	Ready	Ready
9	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Stationery Store	F5A	13	Ready	Ready	Ready	Ready
10	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G10	15	Ready	Ready	Ready	Ready
11	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G11	13	Ready	Ready	Ready	Ready
12	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Girls Common Room	G24	75	Ready	Ready	Ready	Ready

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014		Page <b>15</b> of <b>2</b>	24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Sr Num	Building Number (1)	Building Name (2)	Room type (3)	Room Id (4)	Area(5)	Flooring (6)	Wall & Painting (7)	Elec & Lighting (8)	Furniture & Fixtures(9)
13	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G26	14	Ready	Ready	Ready	Ready
14	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G3	7	Ready	Ready	Ready	Ready
15	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G30	12	Ready	Ready	Ready	Ready
16	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Cafeteria	G31	162	Ready	Ready	Ready	Ready
17	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Boys Common Room	G32	76	Ready	Ready	Ready	Ready
18	JIM BLOCK	JAIPURIA INSTITUTE OF MANAGEM ENT	Toilet	G3A	7	Ready	Ready	Ready	Ready

#### **Circulation Area**

Sr Num	Building Number (1)	Building Name (2)	Area Type (3)	Average Carpet Area(4)	Flooring (5)	Wall & Painting(6)	Elec & Lighting (7)	Furniture & fixtures(8)	Sanitary Fittings (9)
1	JIM BLOCK	JAIPURIA INSTITUT E OF MANAGE MENT	Corridors	1108	Yes	Ready	Ready	Ready	Y

#### **Other Facilities**

All Weather Approach (Motorized Road)	Y
Backup Electric Supply	Y
Barrier free Environment	Υ
CCTV Security	Ν
ERP Software	Ν
Electric Supply	Y
General Insurance	Y
Group Insurance	Y
Institution Web Site	Y

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 16 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Insurance for Students	Y
Stand Alone Language Laboratory (Minimum 25 PCs up to total	Υ
intake of 1000.Further additional 25 PCs per intake of 1000):	
Medical & Counseling	Y
Notice Boards	Υ
Public Announcement System	Υ
Potable Water Supply	Υ
Post & Banking/ATM	N
Projectors in Classrooms	Υ
Safety Provisions	Υ
Sewage Disposal System	Υ
Staff Quarters	N
Telephone & FAX	Υ
Transport Facility	Y
Vehicle Parking	Y
First Aid	Y

#### Laboratory Details

Sr Num	Programme (1)	Leve (2)	Course (3)	Building Number (4)	Building Name (5)	Name of Lab(6)	Yearly Budget(E) (7)	Yearly Budget (C) (8)	Investment till Date(9)	Research Lab? (10)
-----------	------------------	-------------	---------------	---------------------------	----------------------	----------------------	----------------------------	--------------------------------	----------------------------	--------------------------

#### Library Books

Programme(1)	Titles (2)	Volumes(3)	International Journals (4)	National Journals (5)
MANAGEMENT	2667	17065	2	42

#### **Library Facilities**

Working Hrs. (1)	E journal Subscription (2)	Annual Budget (3)	Area in Sqm(4)	Library Management Software(5)	Bar Code or RF Tab book handling (6)	Reprographic Facility(7)	Reading Room Capacity(8)
9 A.M. TO 7 P.M.	2	600000	170	Yes	Yes	Y	100

eJournal Declaration	Status of declaration check box
BY CLICKING THIS CHECK BOX THE INSTITUTE HEREBY DECLARES THAT IT HAS SUBSCRIBED FOR ALL THE REQUIRED E-JOURNALS AS MENTIONED IN APPROVAL PROCESS HANDBOOK	
2013-2014.	Ŷ

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>17</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

#### **Computational Facility**

Legal System Softwar e (1)	Legal Application Software (2)	Internet Bandwidt h in mbps(3)	Internet Contention Ratio(4)	PC exclusivel y available to students (5)	PCs available in Administrati ve Office(6)	Number of PCs available in Library(7)	Number of PCs in language lab(8)	PCs available to Faculty Members( 9)	Printers available to student(1 0)
3	20	2	1:1	180	Data Not Provided by the Institute	Data Not Provided by the Institute	Data Not Provide d by the Institute	Data Not Provide d by the Institute	18

### **Hostel Facility**

Sr Num	Number of rooms having 1 bed/room (area of room)(1)	Building Number(2)	Name of Building(3)	Number of rooms having 2 bed/room (area of room)(4)	Building Number(5)	Name of Building(6)	Number of rooms having 3 bed/room (area of room)(7)	Building Number(8)	Name of Building(9)	Number of rooms having 4 bed/room (area of room)(10)	Building Number(11)	Name of Building(12)
1	<b>Boys</b> 1 (9)			4 (49)			7 (152)			2 (2010)		
2	Girls ()			()			()			()		

### **Operational Funds**

Bank Name(1)	Account Number(2)	Bank Statement Date(3)	Cash Balance(4)
AXIS BANK	636010100006354	11/30/2012	7916756.81
ALLAHABAD BANK	20372745394	11/30/2012	1025821.11

### **Financial Details**

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>18</b> of <b>24</b>

5/20/2014

Please submit the hard copy of this Report to Regional Officer only if Application status is Submitted to RO

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

Income from Central Government	0
Income From State Government	0
Income From Student Fees	448.02
Income From Donations	0
Income From UGC	0
Income From Other Bodies	0
Income From Other/ Internal Revenue	33.89
Salary Teaching Staff	207.95
Remuneration to Visiting/Guest:	0
Salary Non-teaching Staff:	69.32
Library	.05
Equipment	1
Building Maintenance	22
Other Expenditure	165

#### **Company/Industry Details**

Are you a Company/Industry wishing to set up a new Institute?:	No
Type of Company/Industry:	Not Applicable
Is the company having Minimum 100 Cr Turnover	Not Applicable
for the last 3 years? (Attach supporting doc):	
Company/Industry PAN Number:	Not Applicable
Company/Industry TAN Number:	Not Applicable
Company/Industry Registered Address:	Not Applicable
Company/Industry Year of Registered:	Not Applicable

### **Grants Received Details**

Sr Num	Name of Grant (1)	Year in which Grant was Sanctione d (2)	Sanctioned Letter Number(3)	Date of Sanctione d Grant(4)	Date of Receivin g Grant(5)	Activity Related to Grant Conducte d From(6)	Activity Related to Grant Conducte d upto(7)	Submitt ed Final Utilizatio n certificat e (8)	Utilization certificate Reference Number (9)	Date of submissio n of Final Utilization Certificate (10)
-----------	----------------------------	--	-----------------------------------	------------------------------------	--------------------------------------	--	--	--	--	--

#### **Grants Received**

Sr Num	Name of Grant(11)	Final Settlement of Grant(12)	Balance of Grant to be received from AICTE(13)	Balance of Grant to be Refunded to AICTE(14)	Remarks(15)
--------	----------------------	-------------------------------	--	--	-------------

Date of Signature	Seal of Institute	•	Name & signature of Director /Principal	
5/20/2014				Page <b>19</b> of <b>24</b>

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

#### **Ombudsman/Grievance Details**

Grievance Committee Appointment	Yes
OMBUDSMAN Appointment	No

#### **Ombudsman Appointment/Grievance Committee Details**

Sr Num	Committe e Type (1)	Appointment Order reference Number(2)	Date of Appointme nt (3)	Name of the Committe e Member (4)	Professio n (5)	Addres s (6)	Associated With(7)	Mobile Number (8)	e Mail Address (9)	Fax No. (10)
1	Grievance Redressal	JIM/GRIEVAN CE/2012	12/01/2012	DR. D.P.S. VERMA	FORMER DEAN & PROFESS OR	Q.NO 285B CHITR AKOOT ,PITAM PURA, DELHI- 110034	INSTITUTE	9818134 500	DPSVER MA@HO TMAIL.C OM	
2	Grievance Redressal	JIM/GRIEVAN CE/2012	12/01/2012	DR.K.K.G UPTA	FORMER DEAN & PROFESS OR	GHAZI ABAD	INSTITUTE	9410018 707	KK12121 212@G MAIL.CO M	

#### Anti-Ragging Related Details Provided by the Institute

Constitution of Anti-Ragging Committee	Yes
Constitution of Anti-Ragging Squad	Yes
Affidavit obtained from all Students	Yes
Appointment of Counselors	Yes
Affidavit obtained from parents of all the students	Yes
Affidavit obtained from students staying in Hostel	Yes
Affidavit obtained from parents of students staying	Yes
in Hostel	

#### Anti-Ragging Committee/Squad Details

Sr Num	Committee Type (1)	Appointmen t Order reference Number(2)	Date of Appointme nt (3)	Name of the Committee Member (4)	Profession (5)	Addres s (6)	Associate d With(7)	Mobile Number (8)	Fax No (9)	e Mail Address (10)
1	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	DR. DAVIENDE R NARANG	DIRECTOR	SECTO R 14 C, VASUN DHARA , GHAZI ABAD	JAIPURIA INSTITUT E OF MANAGE MENT	9560050 000	120 288 280 4	directorji m@jaipu ria.net

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>20</b> of <b>24</b>

5/20/2014

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

2	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	DR. ANIL KUMAR GUPTA	ASSOCIAT E PROFESS OR	12 A, NEW KRISH NA NAGAR , SHANK ER GALI, GALI NO. 7,	JAIPURIA INSTITUE OF MANGEM ENT	9810675 880	anilyashi ka@gmai I.com
3	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	DR. ASHWANI VARSHNE Y	ASSOCIAT E PROFESS OR	DELHI - 51 136/1, SHIVP URI, NORTH BOPHA ROAD, MUZZA FER NAGAR	JAIPURIA INSTITUT E OF MANAGE MENT	9540156 879	ashwaniv arshney @gmail.c om
4	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	MS. BHANA MALIK	ASSISTAN T PROFESS OR	C - 18, SECTO R 41, NOIDA	JAPURIA INSTITUT E OF MANAGE MENT	9811121 527	bhavna. malik@re diffmail.c om
5	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	DR. MAMTA KUMARI	ASSISTAN T PROFESS OR	39A/ D- 1, ARAVA LI APART MENTS , SECTO R - 52, NOIDA	JAIPURIA INSTITUT E OF MANAGE MENT	9711006 449	mamtago der@gm ail.com
6	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	MR. UTKARSH	STUDENT	D - 57/5D, PLOT NO. 7, KASAP BHAWA N, MOLVI BAGH, SIGRA, VARAN ASI	JAIPURIA INSTITUT E OF MANAGE MENT	9670900 000	newwave 01amit@ gmail.co m
7	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	MS. NIDHI BIYANI	STUDENT	NEW WAVE ACADE MY, 260, AMANI GANG, FAIZAB AD	JAIPURIA INSTITUT E OF MANAGE MENT	9415302 747	nidhi.biya ni89@g mail.com
8	Anti-	JIM/GHAZIA	12/01/2012	MR.	SUB	VASUN	UTTAR	9411984	anilyashi

Date of Signature	Seal of Institute	Name & signature of Director /Principal
5/20/2014		Page <b>21</b> of <b>24</b>

5/20/2014 Please submit the hard copy of this Report to Regional Officer only if Application status is Submitted to RO

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

	Ragging Committee	BAD/2012		BABURAM	INSPECTO R	DHARA POLICE CHOKI, VASUN DHARA ,	PRADESH POLICE	147	ka@gmai I.com
9	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	MR. R. K. GUPTA	ASSTT. ENGINEER	GHAZI ABAD ELEC. DIVISIO N - 2, U.P. AVAS VIKAS PARIS HAD	U.P. AVAS VIKAS PARISHA D	9319053 468	anilyashi ka@gmai I.com
10	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	DR. ANINDITA	FACULTY INCHARGE (HOSTEL)	PLOT NO. 2/65, SECTO R - 6, VAISHA LI, GHAZI ABAD	JAIPURIA INSTITUT E OF MANAGE MENT	9999686 086	aninditas harma18 @gmail.c om
11	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	MR. AJAY TRIPATHI	ASSISTAN T PROFESS OR	H - 165, BLOCK - D, SECTO R - 10, VASUN DHARA , GHAZI ABAD	JAIPURIA INSTITUT E OF MANAGE MENT	9868611 107	ajayinvns @gmail.c om
12	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	DR. PRACHEE MISHRA	ASSISTAN T PROFESS OR	B - 6, FLAT NO. 804, KRISH NA APART MENT, VAIBHA V KHAND , INDIRA	JAIPURIA INSTITUT E OF MANAGE MENT	9560206 627	prachee mishna7 6@gmail. com
						PURAM , GHAZI ABAD			
13	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	MS. NAJAF SHAN FATIMA	ASSISTAN T PROFESS OR	H.NO 105, S.G. IMPRE SSION, SECTO R 4B,	JAIPURIA INSTITUT E OF MANAGE MENT	8800577 994	najaf_sh an@yah oo.com

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 22 of 24

5/20/2014

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

						VASUN DHARA ,GHAZI ABAD			
14	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	MR. SUMESH ARORA	ASSISTAN T DIRECTOR (EXAM)	H.NO 201, GAUPU RI, GAUSH ALA ROAD, GALI NO 4, GHAZI ABAD	JAIPURIA INSTITUT E OF MANAGE MENT	9810249 606	aroras_ji m@yaho o.com
15	Anti- Ragging Squad	JIM/GHAZIA BAD/2012	12/01/2012	MR. AMRISH KUMAR	FACULTY INCHARGE HOSTEL	SECTO R 14C, VASUN DHARA , GHAZI ABAD	JAIPURIA INSTITUT E OF MANAGE MENT	9313824 675	amrish@j aipuria.n et
16	Anti- Ragging Committee	JIM/GHAZIA BAD/2012	12/01/2012	MR. IRFAN AHMAD	REPORTE R	DANIK JAGRA N OFFICE , VAISHA LI	JAIPURIA INSTITUT E OF MANAGE MENT	9873838 836	irfanahm ad75@g mail.com

#### DECLARATION BY THE PRINCIPAL/DIRECTOR OF THE INSTITUTE

I, as the Head of the Institution, hereby declare:

a) That, I have carefully gone through the AICTE Notification dated 27th September 2012, published in the Gazette of India - Extraordinary Part 3, Section (iv) and also the various provisions mentioned in the Approval Process Hand Book 2013-14.

b) That, I am fully aware of the data uploaded by me in respect of my institute on the web portal.

c) That, I am aware that there is no provision of correction of data, alteration of data, subsequent editing and appeal etc. for the online application once uploaded on the web portal.

d) That, I am also aware that application for seeking Extension of Approval, Increase/Reduction of intake, Addition of new courses, Second Shift Programme, Part-time program, Change of site, Closure of course, Supernumerary Seats under PIO, NRI, Change of name, and Conversion of women institute into Co-ed institute (as applicable), shall be processed as per relevant provisions enumerated in the Approval Process Hand Book 2013-14.

e) That, I am aware of the Deficiencies (if any) pointed out in the Report generated online, based on the

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page 23 of 24

\*\*\*Note :- All the Dates in the Report are in mm/dd/yyyy format

factual data uploaded by my institute on the portal.

f) That, I am also aware that the institute is eligible for grant of Extension of Approval, Increase/Reduction of intake, Addition of new courses, Closure of course, supernumerary seats under PIO, NRI, Change of name, Second shift programme, Part-time program, Change of site, Conversion of women institute into Co-ed institute (as applicable) only on fulfillment of prescribed norms & requirements as mentioned in the Approval Process Hand Book 2013-14.

Date of Signature	Seal of Institute	Name & signature of Director /Principal	
5/20/2014			Page <b>24</b> of <b>24</b>

5/20/2014

Please submit the hard copy of this Report to Regional Officer only if Application status is Submitted to RO