**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Aided / SF Men/ Women)**

|  |
| --- |
| **Workload - ODD Semester (2023-2024)** |
|  |  |  |  |  |
| **S.No.** | **Name of the Professor** | **Theory (without conversion)Hours Allotment** | **Practical (without conversion)Hours Allotment** | **TotalHours Allotment** |
|   |   |   |   |   |
|   |   |   |   |   |
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|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| **S.No.** | **Class** | **Theory Hours** | **Practical Hours** | **Total Hours** |
|   | **I UG** |   |   |   |
|   | **II UG** |   |   |   |
|   | **III UG** |   |   |   |
|   | **I PG** |   |   |   |
|   | **II PG** |   |   |   |
|   | **III PG** |   |   |   |
|  | **Language/ English/Allied (if any)**  |  |  |  |
|   | **TOTAL** |   |   |   |

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- |
| **S.No.** | **Total No. of Teaching Staff required** | **Total No. of Teaching Staff available** | **No. of Teaching Staff** **(2023-24)** | **Remarks** |
|  |  |  | **To be appointed**  | **Excess** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.No.** | **Total No. of** **Non-Teaching Staff required** | **Total No. of** **Non-Teaching Staff available** | **No. of** **Non-Teaching Staff** **(2023-24)** | **Remarks** |
|  |  |  | **To be appointed**  | **Excess** |  |

**Date : HOD / MID**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**MASON WORK**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **S.No.** | **Nature of Work to be done and Place of work** |
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**Date : HOD / MID**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**CARPENTRY WORK**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **S.No.** | **Nature of Work to be done and Place of work** |
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**Date : HOD / MID**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**ELECTRICAL WORK**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **S.No.** | **Nature of Work to be done and Place of work** |
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**Date : HOD / MID**

**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

**PURCHASE OF EQUIPMENT / ARTICLES**

**DEPARTMENT OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **S.No.** | **Name of the Equipment/ Articles** **With Details of the Specifications** | **No. of Units** | **Purpose** |
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**Date : HOD / MID**