**JAMAL MOHAMED COLLEGE (AUTONOMOUS)**

**TIRUCHRIAPPALLI – 620 020**

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

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| --- | --- | --- | --- | --- |
| **Workload - ODD Semester (2022-2023)** | | | | |
|  |  |  |  |  |
| **S.No.** | **Name of the Professor** | **Theory  (without conversion) Hours Allotment** | **Practical  (without conversion) Hours Allotment** | **Total Hours 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 to be appointed (or)**  **Excess No. of Teaching Staff available**  **(2022-23)** | **Remarks** |
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| **S.No.** | **Total No. of Non Teaching Staff required** | **Total No. of Non Teaching Staff available** | **No. of Non Teaching Staff to be appointed (or)**  **Excess No. of Non Teaching Staff available**  **(2022-23)** | **Remarks** |
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**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**

**CARPENTER 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**