

QUARTERLY PROFILE OF TEACHING STAFF

A. BASIC INFORMATION:

1	ASSESSMENT YEAR	2022-2023									
2	PERIOD	01.04.2022 -30.06.2022									
3	NAME OF INCUMBENT	BHARATI DEVI									
4	EMPLOYEE ID NO.	2013182700500003									
5	DESIGNATION	Assistant Professor									
6	DEPARTMENT	Assamese									
7	DATE OF JOINING	23/10/1998,Date of provincialisation 14/08/2013									
8	DATE OF BIRTH (DD-MM-YYYY)	2	0	0	1	1	9	6	8		
9	PRIMARY MOBILE NO. (WITH WHATSAPP)	9	8	6	4	4	9	1	6	2	4
10	SECONDARY MOBILE NO.	9	7	0	7	8	3	9	4	1	1
11	E-MAIL	bharatidevi2@gmail.com									
12	PRESENT RESIDENTIAL ADDRESS	Bhetapara,Hno-05,Karnalatapath,Beltola,Guwahati-28,									

B. CURICULLUM:

Program B.A.	Semester	Course No. (e.g.HC-AS-1016)	Topics covered	No. of classes (1 hour duration)	No. of classes in ICT- mode
Arts	2 nd 4 th 6 th	HC-ASM- 2016,2026,HG/RC-2016 HC-ASM-4036,ASM-CC- 4016,HG/RC-4016 HC-ASM-6026,HE-6046,	2 nd ,1 st ,3 rd ,&2 nd Unit All unit,3 rd ,2 nd unit All unit,2 nd ,4 th ,2 nd .&2 nd unit	05hours 08hours 12hours Total=25 hours, (as per routine weekly allotted class)	

C. EXTENTION AND OUTREACH ACTIVITIES:

Title of Activity Organized	Role in the activities (e.g. Coordinator/In- charge /Member if any)	Organizing Unit(Cell/Committee/Departmen t)	Collaboratin g Unit (if any)	Dates (From -To)	No. of Teachers Participan t	No. of Students Participan t	No of Supporting documents / photograph s
----	-----	-----	-----	--	-----	---	---

D. STUDENT RELATED ACTIVITIES (within a maximum of 100 words)

Home Assignments are given to all semesterwise (honours/regular) under G.U guidelines. As a mentor, whenever necessary, various kinds of meetings, group discussions, activities like singing, dancing, writings, awareness programs regarding exams, NAAC, syllabus, classes, library works etc. Also counselling of mentees regarding certain issues are discussed. Group Discussions with students regarding different syllabus topics are done. Whenever required remedial/ tutorial classes taken semesterwise.

<p>Tutorial & Remedial Classes, Bridge Courses , Experiential & Participative Programs ,Student Exchange Programs, Teacher Exchange Programs, Project Works, Student Seminars Community welfare activities, Student career counseling, Home Assignments, Add-On Programs & On-the-Job Trainings, soft skills & communicative skills, Mentor-Mentee activities, Group Discussion, Institutional Visits. Field Studies/Works, etc.</p>	<p>Home assignments, Mentor-Mentee activities ,Group Discussion&Tutorial/Remedial class.</p>
--	--

E. INVOLEMENT ANY OTHER WORKS:

<p>Participation or contribution in Design and Development of Curriculum of affiliating University</p>	<p>-----</p>
<p>Participation in activities related to Setting of question papers, moderation works, Assessment and evaluation process, conduct of exams, invigilation duties, scrutiny works, In-charge of examination cell, Member of examination committee, Involvement of any activities of internal and external examination of the affiliating University.</p>	<p>As a examiner, scrutiniser, Head Examiner of B.A.3rd semester examination,G.U& invigilation duties.</p>
<p>Involvement with celebration and organization of national/international memorial/celebratory days, events and festivals.</p>	<p>Celebration of Rabha Divas and International Yoga Day</p>
<p>Involvement with attainment of Programme outcomes and course outcomes evaluated by the institution.</p>	<p>-----</p>
<p>Involvement in quality assurance activities/works of the Institute as member of IQAC</p>	<p>Member of IQAC Core Committee</p>
<p>Involvement with green campus(Plantation, Gardening) initiatives</p>	<p>Member of Environmental Awareness Cell</p>

Involvement with audit and Budget exercises like energy audit, green audit, Academic and Administered Audit, Annual Budget preparation etc.	-----
participation with sensitization programs on Constitutional responsibilities (values, rights, duties and responsibilities) of citizens	-----
Involvement with red ribbon Club/Anti Tobacco Committee etc.	-----
Involvement towards expansion of collaborations, linkages and signing of MOUs with diverse organizations; Activities performed under MOUs	-----
Involvement with college admission process/ student union election	Involvement in BCSU election
Involvement with In-House bodies/Others	-----
Involvement with sports/games/ cultural activities	College Week
Involvement with the Quality assurance initiatives of the institution like Feedback collection, mentoring etc.	Mentoring
Involvement with the activity of institutional Strategic/ perspective plan for successfully implementation	-----
Involvement with the effective guidance and leadership in various institutional practices.	member of Library Advisory Committee

Involvement with the Capacity building and skills enhancement initiatives taken by the institution like: Soft skills , Language and communication skills, Life skills (Yoga, physical fitness, health and hygiene) ICT/computing skills	-----
---	-------

F. RESEARCH PROJECTS:

Type of Project <i>(Major/Minor/ /Others</i>	Funded by government/non government / other agencies	Date of Sanction and duration	Amount Sanctioned	Amount received during the period
-----	-----	-----	-----	-----

G. RESEARCH ARTICLES:

Title of Publication	Name of Journal/ Volume <i>(ISBN/ISSN if any)</i>	papers published in the Journals notified on UGC website during the last five years	Impact Factor <i>(if any)</i>	Citation Index <i>(if any)</i>	h-index <i>(if any)</i>	Type of Publication <i>(Journal/ Book/ Edited Volume/ Chapter in Edited Volume/ national/ international Conference Proceeding)</i>
--	--	--	--	--	--	--

H. OTHER PUBLICATION WORKS:

Title of Publication	Name of Volume	Category of Publication (Book/ Magazine/ Edited Volume/ Chapter in Edited Volume/ Newspaper)	Date of publication	ISSN/ISBN (if any)
--	--	--	--	--

I. ACADEMIC ACTIVITIES ATTENDED:

Title of Activities	Type (Conference/Seminar/Webinar/ Workshop/RC/OP/STC/FDP,etc.)	Name (s) of Organizer	Dates (From – To)
----	-----	-----	---

J. ACADEMIC ACTIVITIES ORGANIZED:

Names of Event Organized	Category Seminar/ Conference/ Webinar/ Workshop/ Training Program	Role in the activities (e.g. Coordinator/In-charge /Member/Participant if any)	Dates (From-To)	Collaborating Unit (if any)	International/ National/ Regional/ Local/ Institutional	No. of Teachers Participant	No. of Students Participant
----	-----	---	----	-----	-----	-----	-----

I hereby declare that the facts and figures mentioned in this format as above, are correct, genuine and true to my knowledge and belief. I further understand that, any misrepresentation and suppression of fact and figures shall be appropriately dealt with by my higher authority as per established procedural norms.

Bhanati Devi

(Signature of the Incumbent)

This form should be submitted as E-mail attachment (as pdf copy) to the following E-mail
ID: iqac.bccell@gmail.com