

## QUARTERLY PROFILE OF TEACHING STAFF

### A. BASIC INFORMATION:

1	ASSESSMENT YEAR	2022-2023									
2	PERIOD	01.10.2022 -31.12.2022									
3	NAME OF INCUMBENT	<b>HIMANGSHU DAS</b>									
4	EMPLOYEE ID NO.										
5	DESIGNATION	<b>ASSISTANT PROFESSOR.</b>									
6	DEPARTMENT	<b>ECONOMICS</b>									
7	DATE OF JOINING	<b>01/11/1998</b>									
8	DATE OF BIRTH (DD-MM-YYYY)	<b>0</b>	<b>2</b>	<b>0</b>	<b>7</b>	<b>1</b>	<b>9</b>	<b>7</b>	<b>3</b>		
9	PRIMARY MOBILE NO. (WITH WHATSAPP)	<b>9</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>8</b>	<b>0</b>	<b>4</b>	<b>5</b>	<b>2</b>	<b>8</b>
10	SECONDARY MOBILE NO.										
11	E-MAIL	himangshudas412@gmail.com									
12	PRESENT RESIDENTIAL ADDRESS	<b>H.no.-20, Lower Luitpur, Kharguli, Guwahati-04</b>									

**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
BA(ARTS)	ALL SEM	HC-ECO- 2016 HG-ECO-2016 RC-ECO-2016 HG-ECO-4016 SEC-ECO-6014 HC-ECO-6026	YES	PER WEEK 24 CLASSES DURATION OF CLASS IS ONE HOUR PER 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/ Department)	Collaborating Unit (if any)	Dates (From- To)	No. of Teachers Participant	No. of Students Participant	No of Supporting documents / photographs
Interactive session on paying tax	member	Entrepreneursh ip cell	Income tax department, NER	23/05 /22	10/ 65		photo

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

<p>Tutorial &amp; Remedial Classes, Bridge Courses , Experiential &amp; Participative Programs ,Student Exchange Programs, Teacher Exchange Programs, Project Works, Student Seminars Community welfare activities, Student career counseling, Home Assignments, Add-On Programs &amp; On-the-Job Trainings, soft skills &amp; communicative skills, Mentor-Mentee activities, Group Discussion, Institutional Visits. Field Studies/Works, etc.</p>	<p>Tutorial and remedial classes are done on needful basis for all the semester. Mentoring group meet is done along with essay competition amongst them. Parents teachers meet is done. Home assignment is given to all the semesters.</p>
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**E. INVOLEMENT ANY OTHER WORKS:**

<p>Participation or contribution in Design and Development of Curriculum of affiliating University</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>Question papers set for internal/ Sessional examination.</p> <p>Evaluation process is done for sessional examination. Assistant office in-charge of B.A 1<sup>st</sup> semester examination GU., Assistant office in-charge of B.A 6<sup>th</sup> semester examination GU INVIGILATOR DUTY FOR 3<sup>RD</sup> 1<sup>ST</sup> 5<sup>TH</sup> SEM FINAL AND INTERNAL EXAMINATION.</p>
<p>Involvement with celebration and organization of national/international memorial/ celebetory days, events and festivals.</p>	<p>MEMBER OF COLLEGE WEEK SPORTS COMMITTEE.</p>
<p>Involvement with attainment of Programme outcomes and course outcomes evaluated by the institution.</p>	<p>YES</p>
<p>Involvement in quality assurance activities/works of the Institute as member of IQAC</p>	<p>YES, Actively participated in NAAC related works of IQAC.</p>
<p>Involvement with green campus(Plantation, Gardening) initiatives</p>	<p>YES, Involved in plantation drive.</p>
<p>Involvement with audit and Budget exercises like energy audit, green audit, Academic and Administered Audit, Annual Budget preparation etc.</p>	
<p>participation with sensitization programs on Constitutional responsibilities (values, rights, duties and responsibilities) of citizens</p>	
<p>Involvement with red ribbon Club/Anti Tobacco Committee etc.</p>	<p>Organized and actively participated in Anti Tobacco Day</p>
<p>Involvement towards expansion of collaborations, linkages and signing of MOUs with diverse organizations; Activities performed under MOUs</p>	

Involvement with college admission process/ student union election	YES. Member of Admission Committee
Involvement with In-House bodies/Others	YES. Member of Placement Cell, Member of Canteen Committee, Member of Disaster Management Cell etc.
Involvement with sports/games/ cultural activities	YES
Involvement with the Quality assurance initiatives of the institution like Feedback collection, mentoring etc.	YES
Involvement with the activity of institutional Strategic/ perspective plan for successfully implementation	YES
Involvement with the effective guidance and leadership in various institutional practices.	
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	Yes, Co-ordinator of Celebration of International Yoga Day

#### F. RESEARCH PROJECTS:

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

**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.

**HIMANGSHU DAS**

**(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