

## PUNYASHLOK AHILYADEV HOLKAR SOLAPUR UNIVERSITY, SOLAPUR



Performa for supplying information regarding granting of permission to the  
Dept. /Colleges / Institution for Recognition as Research Centre

Sr. No.		
1.	Name of the College/Dept./Inst.:-	
	Address :-	
	Phone (0):-	
	E-mail id :-	
2.	Is there regular /In-Charge principal/ Director/ HoD Appointed? (Attach Letter of Approval)	
3.	Nature of affiliation requested	
4.	Courses and subjects for which permission is required for recognition as Research Centre	
5. a)	Since which year PG Teaching in the Concerned subject started at the Dept. / College /Institute?	
b)	No. of recognized teachers/Scientists available from the staff of the colleges/ Dept./ Institution for post-graduate teaching	
c)	Nature of Research Work carried out in the concerned Subject /Course	
d)	No. of Teachers / Scientists Recognized as Research Supervisors of PAHSUS or from other University. Their Names and Year of Approvals.	

6. a)	Library facilities Books, Journals etc. available for Research and Post-Graduate Teaching Learning. Number of Subject wise books and Journals, available at the College /Dept./Inst.(List to be attached)	
b)	How many books and journals added in The Library in the last 3 years?	
7.	Is Hostel facility available for Research students ?	
8. a)	Financial Provision of the Dept/ College/ Inst. to- wards R& D	
b)	Is there any appointment from non teaching group to look at Research Centre.	
c)	Remuneration for the said person(s)	
9.	Committee should specify which conditions to be fulfilled by Dept/ College / Inst. if recommended for Research Centre	i) ii) iii) iv) v)