

PART I. DETAILS OF INDUSTRY EXPERT UNDER CONSIDERATION FOR DISTINGUISHED VISITING PROFESSORSHIP (To be filled by Industry expert)

1.1	Name			
1.2	Designation			
1.3	Date of birth			
1.4	Qualifications	UG	PG	PhD
1.5	Major Engineering Discipline			
1.6	Specialization			
1.7	Address for Correspondence			
1.8	Tel. No. Fax			
1.9	Name of Industry			
1.10	Department			
1.11	Experience in years	Teaching	Industry	Research
1.12	Career Synopsis of the Nominee	Details covering Educational Qualifications, Degrees obtained, Industrial Experience and any specialized training in research/ design/ management/projects to be attached not exceeding 2000 words		
1.13	Current status	Working Retired		

1.14	Publications	Attach additional pages as necessary		
1.15	Details of IPR	Attach additional pages as necessary		
1.16	No. of PG students guided	Masters	PhD	
1.17	Cell number		Email	
1.18	Activities (lectures/ student Projects/Graduate Theses/ development of New Programmes) proposed			
1.19	Endorsement by Head of Industry Name and Designation			
1.20	Has the consent of Head of Engineering Institution proposed to be visited been obtained			

**PART II. DETAILS OF AICTE APPROVED ENGINEERING COLLEGE/ INSTITUTION
(To be filled by Engineering College/Institution)**

1.1	Name of the AICTE approved Engineering College/ Institution proposed to be visited			
1.2	Address			
1.3	Contact details	Email	FAX	Telephone
1.4	Permanent AICTE ID of the Institute	This ID is available on AICTE web portal		
1.5	Is the programme accredited by AICTE- National Board of Accreditation (NBA)?			
1.6	Name & Designation of the proposed Industry expert			
1.7	Name of the organization/ Industry to which the Industry expert belongs			
1.8	Subject/specialization in which the support is sought			
1.9	Indicate the activities to be undertaken by the Industry Expert (Lectures, Student projects, Curriculum and laboratory development, Involving the Institution in unpackaging new technologies in the industry, Development of new programme(s) at undergraduate/postgraduate level Others)			
1.10	In what way the Institute will assess the impact of Visiting Professor's contribution?			

NAME AND CONTACT DETAILS OF HEAD OF INSTITUTION

NAME AND CONTACT DETAILS OF HEAD OF DEPARTMENT

NAME AND CONTACT DETAILS OF FACULTY COORDINATOR

(Signature of the Head of the Institution)

(Signature of the Head of Department)

With Seal

With Seal

Date:

Date: