

**Annexure XI**

FOR Ph.D. COURSE(S) FOR A.Y. 2024-2025

<b>Date of Inspection</b>	:	
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**Faculty: Ayurveda**

**Subject/Specialty: NA**

1. Name & Address of the College/Research Centre: - Pa. Po. Gurunadi Annapada  
Pa. Po. Gurunadi Annapada, Swamiji Nilayam, 311, 350, 312  
Madhapur, Tel. Madhapur, Beed

Name of Head of the Department : -----  
 Designation : ----- NA -----

**1. Department / Subject wise details of available PhD Guides: - (Attach Annexure 'A')**

Sr. No.	Name of Ph.D. Guide	Designation	Date of Birth	Date of Retirement	Total No. of PhD Scholars Registered till date	Has completed six days Research Methodology Workshop? Yes/No	PhD Recognition No. and Date
NA							

**2. Details of available infrastructure for Research:**

- i) Adequate number of Computers with Internet facility is available? Yes / No
- ii) Adequate number of Books / Journals are available? Yes / No
- iii) Any other specific thing available at the Department:

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**3. Details of Central Research Laboratory:**

- i) Available Area (in sq. ft) : -----
- ii) Is Drugs/Medicines/Chemicals etc. are available for research? Yes / No
- iii) Is Adequate number of Instruments are available? Yes / No
- iv) Is Records of Stock book available? Yes / No

**4. Details of Central Animal House:**

**5. Details of Institutional Ethical Committee: (Attach Annexure "B")**

- i) Date of Composition: -----
- ii) Total Number of Members: -----
- iii) Number of meetings held in previous year: -----
- iv) Whether Records of proceedings are maintained properly? Yes / No
- v) Is Human and Animal Ethics Committee, registered under the appropriate authority? Yes / No

**6. Details of Research Advisory Committee: (Attach Annexure "C")**

- i) Date of Composition: -----
- ii) Total number of Members: -----

Signature of Member

Signature of Member

Signature of Chairman

iii) Number of meetings held in previous year: -----

iv) Whether records of proceedings are maintained properly? Yes / No

7. Doctoral Committee constituted in the lines of RAC? Yes / No

i) If Yes, Date of Composition: -----

ii) Total number of Members: -----

iii) Name of External Subject Expert:  
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8. Is Plagiarism detection software facility available? Yes / No

If Yes, Name of the Software -----

9. Is attendance of the Ph.D. Scholar maintained properly? Yes / No

10. Whether Research Centre is registered under MPCB provisions? Yes / No

11. Whether BMW facility is available? Yes / No

12. Any other important thing related to Research/Department/Facilities, which will be helpful to carry out good quality research under this department:

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### DECLARATION BY LIC

We, the LIC Members, hereby certify that, we have thoroughly inspected and verified the Department/College/Research Centre, the available other facilities, required instruments and equipment, available at the research Centre. The overall observations of the Inspection Committee are as follows: -

Name of Visitor		Sign. of Visitors with Date
1)	Chairman	
2)	Member	
3)	Member	
4)	Member	

  
Principal

Pa.Pu.Gurumauli Annasaheb More  
Ayurved College, Malipargaon  
Tq.Majalgaon-Dist Beed (MH)

Signature of Member

Signature of Member

Signature of Chairman