## Professional Development Courses PDC02: Specific Field Knowledge Training – Proposal

1.	Course Title					
2.	Department Offering the Course /	CE/ME/EC/CS/EE/EI/CH/IT/Others (Specify) -				
	Submitting the Proposal for					
	Certification Courses					
3.	Course Offered by	Outside Faculty /	In-house Faculty/	NPTEL/		
4.	Name of the Outside Faculty					
	Qualification					
	Designation					
	Affiliation					
5.	Name of In-house Faculty / Faculty					
	Coordinator					
6.	Nature of the Course	Theory / Practice	/ Both Theory and	d Practice		
7.	Expected Level of Students	B.Tech. : II Year	/ III Year / IV Year			
		<i>M.Tech.</i> : I Year / II Year				
		Inter Disciplinary (Mention the Disciplines)				
8.	Credit for the Certification Course	One / Two				
9.	Course Outline and Objectives (atta	ch separate sheet ij	f required)			
10. <b>SI. No.</b>	Topics to be Covered (attach sept	arate sheet if requii		Number of		
<i>SI. NO.</i>	Topics	Number of Theory Hours	Number of Practice Hours			
1						
	Total Number of Contact Ho	urs				

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11(a)	Scheme of Ass	essment	(Other than Cer	tificatio	n Courses)					
SI. No	Method of Assessment						Marks Distribution (Out of 100)			
1	Written Test -	I								
2	Written Test -									
3	Assignment - I									
4	Assignment - II									
5	Practice Test -									
6	Practice Test -									
		Al	lotment of Marl	ks for Ec	ich Grade					
S		А		В			С			
						<u> </u>				
11(b)	Scheme of Assessment ( Certification Courses)									
Perform	nance of the stud	dent in th	e course will be	graded	as S/A/B/C by t	he co	ourse	coordinator by		
mappin	g the score earn	ed by the	student ( <i>as ind</i>	icated ir	the certificate)	to a	n Equ	ivalent Grade.		
12.	Documents En	closed								
SI. No	Document Details							Tick		
1	Brief Resume of the Outside Faculty									
2	Letter of Consent from the Outside Faculty									
3	Course Objectives and Topics Covered									
4	Certification Course Details									

The Proposal for conducting the 'Specific Field Knowledge Training' is submitted to the Dean (Academics) for necessary approval of the *Academic Courses Committee* 

## Signature of the Faculty Coordinator Date:

Signature of the HoD Date:

## FOR DEAN'S OFFICE USE

The Proposal was placed for discussion and recommendation in the *Academic Courses Committee* meeting held on \_\_\_\_\_\_. The Proposal was Approved

Signature of Dean (Academics) Date: Signature of the Principal Date:

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