

**VAAGDEVI PHARMACY COLLEGE**  
Bollikunta, Warangal-506 005



**SELF APPRAISAL REPORT**

**Academic year: 2022-2023**

**(Please furnish the information for the period July-2022 to June-2023 only)**

1. Department :
2. Name of the faculty :
3. Father's/Husband Name :
4. Designation :
5. Date of joining :
6. Scale of pay :
7. Gross Salary :
8. Address for correspondence : PAN No:..... Aadhar No:.....  
E mail :  
Phone No. :

**9. Educational Qualifications (in Chronological order starting from Highest degree)**

S. No.	Degree	Board/University	Specialization	Month & Year of Passing	Class/ Division	% of Marks

**10. Details of Experience (starting with the most recent)**

S. No.	Organization	Period		Scale of pay	Total emoluments
		From	To		



*[Handwritten Signature]*  
Principal

Vaagdevi Pharmacy College  
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11. Whether Ratified by JNTUH/SCM if yes, mention the details:

12. National/International Conferences/Seminars/Symposiums/Workshops organized during the last academic year (July-2022 to June-2023):

S.No	Name of the Program	Name of the Coordinator(s)	Date/s, Months, Year

13. National/International Conferences/Seminars/Symposiums/Workshops attended during the last academic year (July-2022 to June-2023):

S.No	Name of the Program	Date/s, Months, Year	Organization

14. Research Publications during the last academic year (July-2022 to June-2023):

i) National & International Journals/Transactions (only SCI/Scopus Indexed)

S.No	Title of the Paper With all citation details	Whether you are the main author	No. of Co-Authors	Name of the Journal	PP, vol., month & year	SCI/Scopus Indexed If Yes, give details	Impact Factor	ISSN No.



*[Signature]*  
Principal  
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ii) Conferences/Seminars etc.,

S.No	Title of the Paper	Name of the Event	PP,vol., Month & year	ISBN No.

iii) Books / Chapters published

Sl. No.	Title with page nos.	Book Title, editor & publisher	ISSN / ISBN No.	Whether peer reviewed	No. of Co-authors	Whether you are the main author

iv) Ongoing and Completed Research Projects and Consultancies

Sl.	Title	Agency	Period	Grant Amount Mobilized (Rs. Lakh)



*[Signature]*  
Principal  
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Bollikunta, Warangal 506005 (T.S.)

(v) Completed Projects / Consultancies

Sl.No	Title	Agency	Period	Grant / Amount Mobilized (Rs. Lakh)	Whether policy document / patent as outcome

16. Projects/travel grants received :

17. Subjects Taught (with pass %)

S.No	Subject	Number of Units Completed		% of pass	Verified by Controller of Examinations	Remarks of HoD
		I-Mid Exam	II-Mid Exam			
I-Semester						
II-Semester						



*[Signature]*  
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18. Laboratories handled

S.No	Subject	Number of Units Completed		% of pass	Verified by Controller of Examinations	Remarks of HoD
		I-Mid Exam	II-Mid Exam			
I-Semester						
II-Semester						

19. Innovative teaching-learning methodologies, updating of subject content, course improvement etc.

S. No.	Description

20. Category -II:

  
*[Signature]*  
 Principal  
 Vaagdevi Pharmacy College  
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21. Projects guided :

UG :

PG :

Ph.D. :

22. Administrative responsibilities held:

S.No	Duty	Rating by the HoD (out of 10 points)

23. Membership of professional bodies


24. Achievements :

25. Any other relevant information :

**DECLARATION BY THE FACULTY MEMBER**

I declare that the above information furnished is true and correct to the best of my knowledge.



Signature of the  
Faculty Member

Principal  
Vaagdevi Pharmacy College  
Bollikunta, Warangal-506005 (T.S)

Note: - Enclose all relevant Annexures.

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Remarks of the HOD

*Signature*

Recommendations of the Principal

*Signature*

