

Check List for Academic Calendar - Department

Name of the Department : _____

Academic Year : _____

Semester : **Odd / Even**

S. No	Requisite	Available / Not Available	Verified & Approved
1	Whether Department Academic calendar in line with Institute Academic Calendar	Yes/No	
2	Department Academic Calendar		

Faculty In-charge

ERP In-charge

HoD

Dean-Academics

Verified by

IQAC-Team

Dean-IQAC