

Krishna Mahavidyalaya, Rethare Bk

IQAC 2018-19

ACTIVITY REPORT
ELECTRONICS DEPARTMENT/ COMMITTEE/ FACULTY

IQAC ACTIVITY No:

NAME OF THE ACTIVITY: National Science Day : Projects Presentation			
DATE	FACULTY	DEPARTMENT/COMMITTEE	COORDINATOR NAME
28-02-2019	Science	Electronics	B.S.Mane
TIME	VENUE	NUMBER OF PARTICIPANTS	NATURE: Outdoor/Indoor
11.00am to 5.00 pm	Department	Open to all	Indoor
SUPPORT/ASSISTANCE:			

BRIEF INFORMATION ABOUT THE ACTIVITY (CRITERION NO. -):

TOPIC/SUBJECT OF THE ACTIVITY	Projects on : FM Transmitter, Light Activated Relay, Remote Operated Inaguration lamps, IR Sensors, Sound Sensors etc.
OBJECTIVES	To develop the interest amongst the students.
METHODOLOGY	Practical Operation of the projects.
OUTCOMES	Liked to All observers

PROOFS & DOCUMENTS ATTACHED (Tick mark the proofs attached):

1. Notice & Letters	2. Student list of	3. Activity report	4. Photos *	5. Feedback form
6. Feedback analysis	7. News clip with details	8. Certificate	9. Any other	10.

IQAC CELL ACTIVITY NUMBER:

NAME OF TEACHER & SIGNATURE	NAME OF HEAD/ COMMITTEE INCHARGE & SIGNATURE	VICE PRINCIPALS SIGNATURE	IQAC COORDINATOR (SEAL & SIGNATURE)
B.S. Mane MB Head	B.S. Mane MB	B.S. Mane	Balan IQAC, Coordinator, KRISHNA MAHAVIDYALAYA, Rethare Bk, Shivnagar - 415108 Tal. Karad, Dist. Satara
The Department of Electronics Krishna Mahavidyalaya, Shivnagar	PRINCIPAL KRISHNA MAHAVIDYALAYA RETHARE (BK.), TAL. KARAD		



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ACTIVITY REPORT
ELECTRONICS DEPARTMENT/ COMMITTEE/ FACULTY

IQAC ACTIVITY No:

NAME OF THE ACTIVITY: Birthday of scientist : Michael Farady			
DATE	FACULTY	DEPARTMENT/COMMITTEE	COORDINATOR NAME
22-09-2019	Science	Electronics	B.S.Mane
TIME	VENUE	NUMBER OF PARTICIPANTS	NATURE: Outdoor/Indoor
11.00am to 11.30	Department	Open to all	Indoor
SUPPORT/ASSISTANCE:			

BRIEF INFORMATION ABOUT THE ACTIVITY (CRITERION NO. -):

TOPIC/SUBJECT OF THE ACTIVITY	Birthday Celebration
OBJECTIVES	
METHODOLOGY	Lecture cum Informative
OUTCOMES	

PROOFS & DOCUMENTS ATTACHED (Tick mark the proofs attached):

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6. Feedback analysis	7. News clip with details	8. Certificate	9. Any other	10.

IQAC CELL ACTIVITY NUMBER:

NAME OF TEACHER & SIGNATURE	NAME OF HEAD/ COMMITTEE INCHARGE & SIGNATURE	VICE PRINCIPALS SIGNATURE	IQAC COORDINATOR (SEAL & SIGNATURE)
B.S.Mane <i>[Signature]</i>	B.S.Mane <i>[Signature]</i>	<i>[Signature]</i>	<i>[Signature]</i>

Head
The Department of Electronics
Krishna Mahavidyalaya, Shivnagar

PRINCIPAL
KRISHNA MAHAVIDYALAYA,
RETHARE (BK.), TAL. KARAD
IQAC, Coordinator,
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