

**V.Y.W.S. DENTAL COLLEGE & HOSPITAL, AMRAVATI**

**- ACADEMIC PERFORMANCE INDEX -**

**(PERIOD OF APPRAISAL 1<sup>ST</sup> JAN. TO 31<sup>ST</sup> DEC. 2021)**

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**Date of Submission**

**Dept. of**

**Name of the Faculty :**

**Designation :**

**Date of Appointment :**

**Qualification : B.D.S. / University / Year of Passing**

**M.D.S. / University / Year of Passing**

**Total Teaching Experience : As UG Teacher : Yr. Mths.**

**As PG Teacher : Yr. Mths.**

*hjb*  
**Convenor**  
NAAC Criteria No. \_\_\_\_\_  
VYWS Dental College & Hospital  
Amravati

*Rhondet*  
**Dean**  
Dental College & Hospital  
Camp Amravati

**A) Teaching Assignments : Lectures/ Group Discussion/Any Other**

Theory*			Practical / Clinical		Score Max.20		25% of syllabus =5 marks, 50% of syllabus =7 marks, More than 70% = 10 marks (Annex)
No. of Classes Allotted/Out of	No. of Classes Conducted	Topic	Allotted as per Timetable	Conducted as per Timetable	Theory (10)	Pract. (10)	

Total Classes Allotted in a year : \_\_\_\_\_ Total Classes Conducted in a year : \_\_\_\_\_

**B) Record of Patient / Special Cases Treated :**

No. of Patient Treated	Type of Treatment / Prosthesis	Specify the problems and Treatment provided	Revenue generated (Annual)	Importance of the case from the point of Education	Score Max. 20	5 marks for each special case

**C) No. of Research Projects undertaken :**

Type of Project	Title of Project	Status	Funding Agency and Amount, if any	Score Max. 20	5 marks for Short Term, 10 marks for Mid Term, 15 marks for Long Term
Short Term Mid Term Long Term					

**D) No. of Research Publications :**

Name of Journal with Impact Factor	Title of Paper	Issue/Volume/ Year of Publication	Category of Journal	Status of Author Ist / IInd / IIIrd or Any other rank	Score Max.30	5 marks for publication, 10 marks for publication in index journal

(Category - I and Author I = 10)

(Category - II and Author I/II = 7)

(Any other Category & Any rank = 5)

Attach copy of publication in support

Total No. of Research publication, so far : \_\_\_\_\_

**E) Participation in various Scientific Activities :**

Nature of the Activity	Organizing Body	Participated as	Date	Proof in Support	Max. 10	3 marks for CDE Workshop 5 Marks for Inter Institutional Activity & Conference
CDE Programme						
Workshop/Symposium						
Conference						
Inter Institutional Activities						

**F) Organization of various Scientific Activities in Institution by Dept. /by Self :**


Nature of the Activity	Faculty Invited	Topic	Date	Proof in Support	Max. 20	CDE  Workshop = 10 Conference = 20
CDE Program						
Workshop/Symposium						
Conference						
Inter Institutional Activities						

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 VYWS Dental College & Hospital  
 Amravati

R. Sonalkar  
**Dean**  
 Dental College & Hospital  
 Camp Amravati

**G) Organization of various Extramural Activities in Institution by Dept. /by Self :**

Nature of the Activity	Faculty Invited	Topic	Date	Proof in Support	Max. 10

  
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 Amravati

Rhozakh Jee  
**Dean**  
 Dental College & Hospital  
 Camp Amravati

Self Appraisal Score to be written by the Applicant as per the proof attached for verification :

Excellent (Score above 125)	Very Good (Score 100 to 125)	Good Score 80 to 100	Average (Score upto 75%)	Below Average (Score Less than 75%)

Date : \_\_\_\_\_

Signature of the Faculty

Verification of marks/Grade by Head of the Department with correction, if any

\_\_\_\_\_  
\_\_\_\_\_

Signature of the HoD

Verification by Dean for granting final Grading to the faculty :

\_\_\_\_\_  
\_\_\_\_\_

Signature of the Dean