

ALL INDIA SURVEY ON HIGHER EDUCATION

DATA CAPTURE FORMAT - II
COLLEGES / INSTITUTIONS
AFFILIATED/ RECOGNISED BY THE UNIVERSITY

YEAR: 2019 - 2020

As on 30th September 2019



सत्यमेव जयते

Ministry of Human Resource Development
Department of Higher Education
New Delhi



एक कदम स्वच्छता की ओर

BLOCK 2A: BASIC INFORMATION

[Help](#)

1. *Name of the College / Institution.

KARPAGA VINAYAGA INSTITUTE OF MEDICAL SCIENCES AND R

Update Pre-filled Data

2. AISHE Code

C-45816

3. (i)* Postal Address Line 1

G S T ROAD,CHINNAKOLAMBAKKAM

(ii) Postal Address Line 2

PALAYANOOR POST,PADALAM VIA

(iii) City:

MADHURANTHAGAM

(iv) *State:

Tamil Nadu

(v) *District:

604

(vi) *Pin Code:

6 0 3 3 0 8

(vii) Web site:

www.kvcn.edu.in

(viii) Total Area [In acre]:

36

(ix) Total Constructed area [In sq m]:

330,000

4. Year of Establishment

2009

5. College Contact Details

A. (i) *Name of Principal:

Dr. Sufala SunilVishwasrao

(ii) *Contact No:

0 9 5 5 1 4 0 3 2 0 3

(iii) E-mail id:

kims.medical@yahoo.com

B. (i) *Name of College Nodal Officer for AISHE:

Dr. Sufala Sunil Vishwasrao

(ii) *Designation:

Principal

(iii) *Telephone No:
(with STD code)

(iv) Mobile:

(v) *E-mail id:

6. (i) *Name of University to which Affiliated:

(ii) Name of other Universities to which Affiliated:

(iii) *The Statutory body through which recognized:

In case of Others, please specify

7. Year of Affiliation with University:

8. *(i) Location of the College/ Institution : Rural Urban

(ii) Block/City/Town

9. Geographical referencing: Latitude (in degree)
[Values must contain minimum of 5 digits after the decimal point] [Range: 6 - 38]

Longitude (in degree)
[Range: 68 - 98]

[Help](#)

10. *Type of College/ Institution:

11. *Whether College is Autonomous : Yes No

12. *Management of College/ Institution:

13. *(i) Is it a Specialized College/ Institution : Yes No

(ii) If Yes, then select any one:

In case of Others, please specify

(iii) Whether the college is running only diploma level course(s) : Yes No

(iv) If Yes, then select any one type:

14. *Is it Evening College/Institution: Yes No

15. *Whether the College/Institution is exclusively meant for girls: Yes No

16. (i) *Staff Quarter Available Yes No

ii) If Yes,

Category	Number
Teaching Staff	23
Non Teaching Staff	36
Total	59

17. (i) *Does the College / Institute has Student Hostel Yes No

(ii) If Yes, Number of Hostel

2

Sl.NO.	Name of Hostel	Hostel Type	Intake Capacity	No. of Students Residing
1	Boys Hostel	Boys Hostel	500	220
2	Girls Hostel	Girls Hostel	500	272

BLOCK 2B: DETAILS OF PROGRAMMES OFFERED BY THE COLLEGE

[Help](#)

1. List of Faculty & Departments

1 Faculty Name

* The field is disabled, no entry is required

Sl.no.	Name of the Departments
1	Orthopaedics
2	Dermatology
3	Anatomy
4	OBG
5	TB & Chest
6	Forensic Medicine

+	-	7	General Medicine
+	-	8	Aneesthesiology
+	-	9	Community Medicine
+	-	10	Paediatrics
+	-	11	General Surgery
+	-	12	ENT
+	-	13	Physiology
+	-	14	pathology
+	-	15	Ophthal
+	-	16	Biochemistry
+	-	17	Pharmacology
+	-	18	Psychiatry
+	-	19	Radiology
+	-	20	Microbiology

2. Regular Program Details [All programmes in which students are enrolled in the Institution are to be listed]

Faculty	Department	Level	Name of the Programme	Discipline/ Subject	Broad Discipline Group Category	Broad Discipline Group Name	Approved Intake	Admission Criterion	Course Duration		Type	Examination System	Statutory Body through which approved	University through which approved
									Year	Month				
+	-													
		Under Grad	129	Medicine	20	068	100	University	5	6	Self Financ	Semester	Medical Cou	Tamil Nadu D

Total number of Regular programmes

1

BLOCK 2C: STAFF INFORMATION

[Help](#)

Note:

PWD = Persons with Disability

Other Minority = Christians, Sikhs, Buddhists, Zorastrians (Parsis) and Jains

1. TEACHING STAFF

Kindly download TIF under “Download e-Forms” link after logging-in to AISHE and attach filed-in TIF in Block 2(I).

2. NON TEACHING STAFF

Staff Type	Group	Sanctioned Strength	Type	Number in Position										Remarks	
				General Category		Scheduled Caste(SC)		Scheduled Tribe(ST)		Other Backward Classes(OBC)		Total			
				Total	Female	Total	Female	Total	Female	Total	Female	Total	Female		
Non Teaching Staff Excluding Lib &	Group D	0	Total	300	190	0	0	0	0	0	0	0	300	190	
			PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
			Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
			Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	



Total number of Non Teaching staff

300

Total number of females in Non Teaching staff

190

Total number of males in Non Teaching staff

110

BLOCK 2D: NUMBER OF STUDENTS ENROLLED IN THE COLLEGE / INSTITUTION

[Help](#)

Note:

PWD = Persons with Disability

Other Minority = Christians, Sikhs, Buddhists, Zorastrians (Parsis) and Jains

Regular Course

Faculty

Department

Level	Programme	Broad Discipline Group Name	Discipline / Subject	Type	Year	Category	Number of Students Enrolled								Remarks		
							General		SC		ST		OBC			Total	
							Total	Girls	Total	Girls	Total	Girls	Total	Girls		Total	Girls
Under Graduate	M.B.B.S.-Bachelor	General Medicine	Medicine	Self Financing	1	Total	16	10	13	5	1	0	70	35	100	50	
						PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
Under Graduate	M.B.B.S.-Bachelor	General Medicine	Medicine	Self Financing	2	Total	5	4	13	6	0	0	82	42	100	52	
						PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
Under Graduate	M.B.B.S.-Bachelor	General Medicine	Medicine	Self Financing	3	Total	8	3	13	9	1	1	78	43	100	56	
						PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
Under Graduate	M.B.B.S.-Bachelor	General Medicine	Medicine	Self Financing	4	Total	4	2	12	7	1	1	83	39	100	49	
						PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	
						Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	

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Under Graduate	M.B.B.S.-Bachelor of General Medicine	Medicine	Self Financing	5	Total	3	2	14	5	1	0	82	50	100	57		
					PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
					Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
					Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
Under Graduate	M.B.B.S.-Bachelor of General Medicine	Medicine	Self Financing	6	Total	3	2	14	5	1	0	82	50	100	57		
					PWD (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
					Muslim Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	
					Other Minority (out of Total)	0	0	0	0	0	0	0	0	0	0	0	

Total number of students enrolled in the department

600

Total number of girls enrolled in the department

321

Total number of boys enrolled in the department

279

Foreign Students Enrollment

Whether Foreign Students are enrolled in the College Yes No

Out of the total student enrollment, number of foreign students

	Country	Level	Programme	Broad Discipline Group Name	Discipline / Subject	Number of Students Enrolled	
						Total	Girls
<input type="button" value="+"/> <input type="button" value="-"/>							

BLOCK 2E: EXAMINATION RESULTS

[Help](#)

(Number of Students passed / awarded degree during the year 1st October, 2018 to 30th September, 2019)

Regular Mode

Level	Programme	Broad Discipline Group Name	Discipline / Subject	Total Number of Students Appeared in Final Year		Total Number of Students Passed / Awarded Degree		Out of Total, Number of Students Passed with 60% or above	
				Total	Girls	Total	Girls	Total	Girls
Under Graduate	M.B.B.S.-Bachelor of Medicine a	General Medicine	Medicine	100	53	100	53	48	47

Total Number of Students Appeared in Final year Examination

Total Number of Students Passed / Awarded Degree in Regular Mode

Total Number of Girls Passed / Awarded Degree in Regular Mode

Total Number of Boys Passed / Awarded Degree in Regular Mode

BLOCK 2F: FINANCIAL INFORMATION

[Help](#)

(During Financial year 2018 - 2019)

INCOME			
S. No.	Items	Amount converted in thousands	Amount in absolute Rupees
1	Grants Received from		
(i)	University Grants Commission	0	0
(ii)	Distance Education Council	0	0
(iii)	Other Central Government Departments	0	0
2	Grants Received from State Government	0	0
3	Grants Received from University	0	0
4	Grants Received from Local Bodies	0	0
5	Donations	0	0
6	Tuition Fee	219,454.4	219,454,400

EXPENDITURE			
S. No.	Items	Amount converted in thousands in thousands	Amount in absolute Rupees
1	Salary, Allowances & Retirement Benefits	116,995.352	116,995,352
2	Buildings (Construction and Maintenance)	6,738,690.312	6,738,690,312
3	Library & Laboratory	80,103.144	80,103,144
4	Research Activities	0	0
5	Scholarships	0	0
6	Other Expenses	3,214.696	3,214,696
7	Total	6,939,003.504	6,939,003,504

7	Other Fees	0	0
8	Interests	0	0
9	Sale of Application Form	35	35,000
10	Other Income	0	0
11	Total	219,489.4	219,489,400

BLOCK 2G: INFRASTRUCTURE RELATED DATA

A. Please tick mark in the box(es) against the infrastructure and enter the number wherever applicable, which is (are) available in the College / Institution.

[Help](#)

Note:

NKN = National Knowledge Network

NMEICT = National Mission on Education through Information & Communication Technology

1.	Playground	<input checked="" type="checkbox"/>	1
2.	Auditorium	<input checked="" type="checkbox"/>	1
3.	Theatre	<input checked="" type="checkbox"/>	1
4.	Library	<input checked="" type="checkbox"/>	1
(a)	Number of books		
(b)	Number of Journals (Peer reviewed) subscribed		
5.	Laboratory	<input checked="" type="checkbox"/>	1
6.	Conference Hall	<input checked="" type="checkbox"/>	1
7.	Health Center	<input checked="" type="checkbox"/>	1
8.	Gymnasium/ Fitness Center	<input checked="" type="checkbox"/>	1
9.	Indoor Stadium	<input checked="" type="checkbox"/>	1
10.	Common Room	<input checked="" type="checkbox"/>	1
11.	Computer Center	<input checked="" type="checkbox"/>	1
12.	Cafeteria	<input checked="" type="checkbox"/>	1
13.	Guest House	<input checked="" type="checkbox"/>	1
14.	Separate Common Room exclusively for Girls	<input checked="" type="checkbox"/>	1

15.	Solar Power Generation	<input checked="" type="checkbox"/>
16.	Connectivity NKN	<input checked="" type="checkbox"/>
17.	Connectivity NMEICT	<input checked="" type="checkbox"/>
18.	Campus is differently abled friendly	<input checked="" type="checkbox"/>
(i).	Separate toilet for disabled female	<input checked="" type="checkbox"/>
(ii).	Ramp attached to classroom / library	<input checked="" type="checkbox"/>
19.	Grievance Redressal Mechanism	<input checked="" type="checkbox"/>
20.	Vigilance Cell	<input checked="" type="checkbox"/>
21.	Equal Opportunity Cell	<input checked="" type="checkbox"/>
22.	Sexual Harassment Cell	<input checked="" type="checkbox"/>
23.	Counselors for students	<input checked="" type="checkbox"/>
24.	Clinic / first-aid room	<input checked="" type="checkbox"/>
25.	Separate toilet for girls	<input checked="" type="checkbox"/>
26.	Skill development centre	<input checked="" type="checkbox"/>
27.	Self-defence class for females	<input checked="" type="checkbox"/>
28.	Anti-ragging Cell	<input checked="" type="checkbox"/>

PWD (out of Total)												
Muslim Minority (out of Total)												
Other Minority (out of Total)												


2. EDUCATION LOANS

Whether College / Institution maintains education loans data: Yes No

Category	Number of Students Availing Education Loans										Remarks	
	General Category		Scheduled Caste(SC)		Scheduled Tribe(ST)		Other Backward Classes(OBC)		Total			
	Total	Female	Total	Female	Total	Female	Total	Female	Total	Female		
Total												
PWD (out of Total)												
Muslim Minority (out of Total)												
Other Minority (out of Total)												

3. ACCREDITATION

Whether Institution accredited: Yes No

	Accreditation Body	Name	Is Score Provided	Maximum Score	Score
	Others	NABH	No		

BLOCK 2I: ATTACHMENTS

1. *Please attach Teacher Information Form

Browse

TIF_KARPAGA VINAYAGA INSTITUTE OF MEDICAL SCIENCES AND RESEARCH CENTR



BLOCK 2J: REMARKS

*UNDERTAKING

I, VC/Principal/Director, hereby certify that the information furnished above is correct and based on the actual facts.

Check Form

Modify

Save

Note: After filling the complete form, please click on "Check Form" button. Form can be uploaded on the portal only when the message "Check Form Passed" appears on the screen.

Upload Procedure:

1. Login into AISHE web application (<http://aishe.gov.in/>) with your User ID and Password.
2. Select "Form Management" from left side menu and go to "Upload DCF" tab.
3. Browse the completed form and click the "Upload DCF" button.

4. Message "Form Uploaded Successfully" will be displayed on the screen.