BOARD OF TECHNICAL EDUCATION, UTTAR PRADESH LUCKNOW

1528

INSPECTION REPORT FOR EXISTING D. ENGG INSTITUTION (To be filled by Inspection Committee)

1. Name and Address of the Applicant Society/Trust

. Name of Society/Trust: The Sanatan Dharm College Association

ii. City/Village : Muzaffarnagar

iii. Post : New Mandi

iv. Tehsil : Sadar

v. District : Muzaffarnagar

vi. State : Uttar Pradesh

vii. Pin Code : 251001

viii. Land Line No. : 0131-2660080

ix. Mobile No. : 8937095030

x. Email id : sdenggpoly528@gmail.com

xi. Trust/Society website: www.sdcetmzn.org

2. Details of Applicant Society/Trust

(i) The Society/Trust Registration No. : 653

(ii) Date of Registration No. : 26/03/1961

(iii) Place of Registration : Society Registrar, Saharanpur

3. Name and Address of the Institution at the Permanent Site

i. Name of Society/Trust: S.D. College of Engineering & Technology

ii. City/Village : Muzaffarnagar

iii. Post : New Mandi

iv. Tehsil : Sadar

v. District : Muzaffarnagar

vi. State : Uttar Pradesh

vii. Pin Code : 251001

viii. Land Line No. : 0131-2660080

ix. Mobile No. : 8937095030

x. Email id : sdenggpoly528@gmail.com

xi. Trust/Society website: www.sdcetmzn.org

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Name and Designation of the Representative of Society/Trust with Address and Signature.

and organ	1111111			Mobile no.	Signature
Sl.No.	Details of Representative	Designation	Email-id	8937095030	36/
Representative-1	Dr Sidharth	Director	sdengg@rediffmair.com	100028	Toute
Representative-2	Dr. Nitin Gupta	Principal	sdenggpoly528@gman.com	ies with any	11/2
	1		C:!!!+!	oc with any	Ottio.

Whether the Institution is sharing the built-up area facilities with any other 5. Institution/any other Programs.

If yes, then give details

Institution is sharing the built-up area facilities with B.Tech, MBA & M.Tech courses.

Detail of all Courses in the Institute: 6.

etail	of all Courses in the Insui	Courses	Duration of	Approved	
S.No	Programme		course	240	
		Diploma	03 years		
1	Engineering & Technology		04 years	360	
	Engineering & Technology	B.Tech	04 years	09	
2		M.Tech	02 years	60	
3	Engineering & Technology	IVI. ICCII	02 years		
		MBA	UZ years		
4	Management				

Land Detail 7.

Urban i. Location (Rural / Urban) :

10 ii. Area (in acre)

iii. Gata Nos

iv. All Gata Nos. are connected to each other : NA

v. Whether owned by Applicant Society/Trust : YES

: 1236 dt. 14.02.1990 vi. Registration No. with Date

vii. If the land is on lease from Government bodies then the purpose for which it was lease and period of lease granted.

NA

viii. Any loans/mortgage raised against the titles of the land

ix. Land conversion certificate

: Teshil Sadar, Muzaffarnagar Name of Competent Authority

Appeal No. with date

Obsum 2

ADMINISTRATION 2014_Engg Inst Inspection Format.docx

Emming rian/Map detail

- Competent Authority for sanctioning the map: MDA With MAP
- Sanctioned No. with Date :88/बी नई मण्डी/2012/चार (गंठ नियंत्रण) 20 दिनांक 18/10/2012

: 1562/MDA/2021 dt. 27.10.2021

9. Audited Statement/Balance sheet of society/ trust (Last financial year) (Enclose copy)

Balance sheet:

2021-22 & 2022-23

Copy Attached

10. Details of Head of Institution (Attach Appointment Letter)

Name : Dr. Nitin Gupta

ii.

Designation : Principal

III.

Date of Birth : 20/02/1981

iv.

Qualification : Ph.D

٧.

Area of Specialization: Computer Science & Engineering

vi. Aadhar No. : 652185802772

Pan No. : AIWPG7476J

11. **Details of Faculties**

All details attach with appointment letters separate sheet to be attached for each faculty.

Copy of appointment letters, aadhar & PAN card with Affidavit is Attached

Attach "Application deficiency report" of Institute submitted to AICTE (Duly attested 12. by Head of Institution/Director/Manager)

Copy of Deficiency report 2023-24 & 2024-25 are Attached

13. Latest AICTE "Extension of Approval (EoA)"

> Copy of EOA 2023-24 is Attached EOA for 2024-25 are applied to AICTE (Affidavit is Attached)

Deficiencies raised by inspection committee if any (other than self-disclosure 14. as mentioned in EOA)

Particulars	Deficiency raised by committee	Details of Deficiency	Remarks(if any)
1.Administrative	Area	/	1
a. Exam Control		1	^
Office		/ /	
b.	/		
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	16.	Date of Inspection a	nd Time. 14.65	2024 & 05.32	2 Pm.	
	17.	Signature of Inspec	tion Committee wi	th name and decim	ahtion.	
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