



POORNIMA UNIVERSITY

(Estd. by Rajasthan State Legislature vide Act No. 16/2012 & Recognized under Section 22 (1) of UGC Act 1956)



FORTNIGHTLY ATTENDANCE ANALYSIS OF HOSTELLERS

ATTENDANCE EVALUATION FORM TO BE FILLED (FORTNIGHTLY) BY FACULTY ADVISOR

Name of Student: _____ Year: _____ Branch _____

Duration: _____ to _____ Room No. _____ Hostel Name & No.: _____ Name of Faculty Advisor _____

S. No.	Attendance for Current Half	Cumulative Attendance	+/- Change From Last Cumulative	Reasons for if Decline in Attendance	Room Cleanliness	Behavior	Remarks By Faculty Advisor	Remarks by Coordinator	Remarks by Chief Coordinator
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

Remarks: Room Cleanliness: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor
Behaviour: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor

Signature of Faculty Advisor with Date



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REPORTING OF WEEKLY STUDENTS INTERACTION

STUDENT INTERACTION FORM TO BE FILLED (EVERY WEEK) BY FACULTY ADVISOR

Name of Student: _____ Year: _____ Branch _____

Duration: _____ to _____ Room No. _____ Hostel Name & No.: _____ Name of Faculty Advisor _____

S.No	Rating of Academics (0-5)			Total Grade (Out Of 15)	Problems Faced	Remedial Steps Taken/Suggestion Given	Remark by Faculty Advisor with Date	Remark by Coordinator with Date
	Class Notes Completed	Tut. Completed Till Date	Assignment / Lab Report					

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor

Signature of Faculty Advisor with Date



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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

REPORT BY FACULTY ADVISORS (TO BE SUBMITTED FORTNIGHTLY TO ACADEMIC ADMINISTRATOR)

Name of Faculty Advisor Hostel Name: Duration: to

- 1. % Students having Adequate Attendance (More than 75%) :
- 2. % Students having Adequate Rating (More than 10 out of 15) :

S.No	Name of Students who have low Attendance (last 10 students in order)	Class and Year	Room No.	S.No	Name of Students who have Academic grade less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor



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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

HOSTEL-WISE REPORT BY FACULTY ADVISOR (TO BE SUBMITTED FORTNIGHTLY TO THE DEAN)

Duration: _____ to _____

Hostel Name: _____ Date _____

S.No	Name of Students who have low Attendance (last 10 students in order)	Class and Year	Room No.	S.No	Name of Students who have Academic grade less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			

Remarks by Dean (Weekly) _____

Signature of Faculty Advisor
with Date



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WEEKLY REPORT BY WARDEN

Duration: _____ to _____ Hostel Name: _____ Date _____

S.No	Room Hygiene 5/4/3/2/1		Behavior 5/4/3/2/1		Attendance & Regularity Y/N		Discipline Good/Bad		Habits Good/Bad	
	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade	Name of Student	Grade
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										

Remarks By Warden	
Remarks By Dean	

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor