*To,*

*The Coordinator,*

*IQAC Cell,*

*Jaihind College of Engineering,*

*Kuran-410 511*

***Subject: Permission to organize Event in the month of OCT academic Year 2018-19.***

*Respected Madam,*

*With reference to above mentioned subject, Department of National service Scheme, wish to organize the* ***Health Check up Camp*** *for 01 days with the following details.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Sr.No*** | ***Name of Event*** | ***Level***  ***(State/National/Intern.)*** | ***No. of Days*** | ***Date of Conduction*** | ***Approx. Participants*** | ***Approximate Expenditure*** | ***Funding Agency*** | ***Name of Resource Person*** |
| *01* | *Health Check up Camp* | *------------* | *01* | *01/10/18* | *300* | *500=00* | *SPPU* | *Dr. VILAS NAYKODI,La SACHIN BHOR,La SHITALM PATVA,La AJAY CHORDIYA* |

Kindly accept the same and do the needful.

Thanking You.

Name and Sign of Event coordinator Name and Sign of Head of Department

Prof.R.S.Kajabe Prof.R.S.Kajabe

|  |  |
| --- | --- |
| **For IQAC Cell Only** | |
| Date of Meeting |  |
| IQAC Coordinator | IQAC, Chairman |

*To,*

*The Coordinator,*

*IQAC Cell,*

*Jaihind College of Engineering,*

*Kuran-410 511.*

***Subject: Submission of “Health Check up Camp******“Event Report Conducted in the Month of OCT of Academic Year 2018-2019.***

*Respected Madam,*

*With reference to above mentioned subject, Department of National service Scheme, wish to submit the Report of* ***Health Check up Camp*** *for 01 days with the attaching details.*

*Kindly accept the same and do the needful.*

*Thanking You.*

*Name and Sign of Event Coordinator*

*Prof.R.S.Kajabe*

**EVENT NAME: HEALTH CHECK UP CAMP**

**Date-01/10/2018**

|  |  |  |
| --- | --- | --- |
| *Organizing Department* | *:* | *NSS* |
| *Event location* | *:* | *AT-JCOE,KURAN TAL-JUNNAR DIST-PUNE(LAIBRARY)* |
| *Duration in time/Days* | *:* | *01 DAYS* |
| 1. *No. of Students attendees* | *:* | *157* |
| 1. *No. of Faculty Attendees* | *:* | *17* |
| 1. *No. of Other Attendees* | *:* | *00* |
| 1. *Total attendance (a+b+c)* | *:* | *174* |
| *Funding body (if any)* | *:* | *SPPU* |
| *Total expenditure in INR* | *:* | *350=00* |
| *Fund allocated*   1. *By Institute* | : | *00=00* |
| 1. *By Funding Body* |  | *350=00* |
| 1. *Fund raised through other sources* | *:* | *00* |
| *Total Expenditure in INR* | *:* | *350=00* |
| *Promotional materials* | *:* | *nil* |
| *Event Summary Report with photos* | *Health Check up**camp organize on birth date of hon.chairmen JCEI’S Tatyasaheb Gunjal. Health Check up**camp event present Dr. Vilas Naykodi,la SachinB bhor,la Shital Patva,la Ajay Chordiya,Mr.Babu Pate ,JPP Principal Y.S. Gunjal, JCOE Pricipal Dr D.J Garkal ,CEO Prof D.S. Galhe, All HOD’s,NNS PO,SWO HEAD, IQAC Member Present.* | |

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Mr.Babushet pate, Chairman Tatyasaheb Gunjal, Director, CEO, Principal, Inaugurating the Health Check upCamp.

