**Proposal Format**

**1. Introduction**

**1.1. Name of the Campus :**

**1.2. Address :**

**1.3. Date of Establishment :**

**1.4. Permission Date :**

**1.5. Brief introduction of the Campus ( around 150 words)**

**1.6. Challenges :**

**1.7. Opportunities :**

**1.8. Overall Vision of the Campus :**

**1.9. Target related to ICT Program :**

**1.10. Objectives :**

**1.11. Strategies :**

**2. Number of students (Level wise)**

|  |  |  |
| --- | --- | --- |
| **Academic Year** | **Bachelor** | **Master** |
| **Boys** | **Girls** | **Total** | **Boys** | **Girls** | **Total** |
| **2073** |  |  |  |  |  |  |
| **2074** |  |  |  |  |  |  |
| **2075** |  |  |  |  |  |  |

**3. Result of Students (Level wise)**

|  |  |  |
| --- | --- | --- |
| **Academic Year** | **Bachelor** | **Master** |
| **Appeared** | **Passed** | **Appeared** | **Passed** |
| **Boys** | **Girls** | **Total** | **Boys** | **Girls** | **Total** | **Boys** | **Girls** | **Total** | **Boys** | **Girls** | **Total** |
| **2073** |  |  |  |  |  |  |  |  |  |  |  |  |
| **2074** |  |  |  |  |  |  |  |  |  |  |  |  |

**4. Teachers Details**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sn** | **Name of Teacher** | **Address** | **Acad.****Qualif.** | **Teaching Subject** | **Appoint** **Date** | **Remarks** |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |

**Note : write down ICT Qualification in Remarks**

**5. Status of existing ICT Lab**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Sn** | **Name of apparatus** | **Quantity** | **Price** | **Purchased Date** |
| **1** | **Lap top** |  |  |  |
| **2** | **Desk top** |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |

**6. Gap analysis (Scarcity) in Laboratory**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sn** | **Name of apparatus** | **Quantity** | **Price** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |

**Note: All of the required (Scare) apparatus should be included at this table**

**7. Lab Improvement Plan (After receiving fund)**

**7.1. Materials Purchase and management plan :**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sn** | **Name of apparatus** | **Quantity** | **Price** |
| **1** |  |  |  |
| **2** |  |  |  |
| **3** |  |  |  |
| **4** |  |  |  |

**Note: All of the Perspective apparatus should be included at this table.**

**7.2. Further Activities plan :**

**8. Expected Outcomes :**

**9. Attached Documents :**

**9.1. Minute copy of the Campus Management Committee for ICT Lab Improvement,**

**9.2. Related pages of Campus Improvement Plan for Lab Improvement,**

**9.3. Copy of Permission Letter from concerned authority,**

**9.4. Possible amount of fund that can be shared from the Campus.**

**……………………………………… ………………………………………….**

 **Signature Signature**

 **Name of the Campus Chief Name of the Chairperson**

 **Campus Management Committee School Stamp**