



Amala
COLLEGE OF NURSING
ACCREDITED BY NAAC WITH A GRADE

AMALA COLLEGE OF NURSING AQAR (2023-2024)



CRITERION 6– Governance, Leadership and Management

Key Indicator 6.3–Faculty Empowerment Strategies

Metric No. 6.3.5 Institution has Performance Appraisal System for teaching and non- teaching staff

SUBMITTED TO



National Assessment and Accreditation Council



AMALA COLLEGE OF NURSING

Amalanagar, Thrissur - 680 555
Ph : 0487-2304070, 2304120, 2307574
E-mail: amalanursingcollege@amalaims.org
Web: www.amalanursingcollege.org



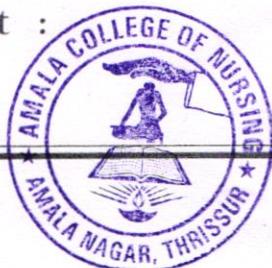
Faculty Work Book

20..... - 20.....

Name :

Designation :

Department :



Regu
Prof. Dr. RAJEE REGHUNATH

PRINCIPAL
AMALA COLLEGE OF NURSING
AMALA NAGAR P.O., THRISSUR-680 555

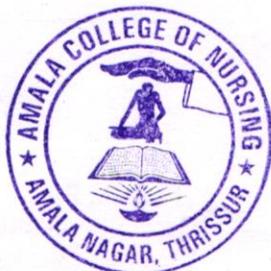
Vision

“To establish a centre of excellence providing value-added education that combines effective teaching, focused academic exposure, and productive research with the aim of training healthcare personnel with professionalism, and spirit of love and service as their hallmarks.”

Mission

1. Appointing faculty known for their academic excellence and who are committed to carrying out the institutional mission.
2. Forming effective health care personnel marked by up-to-date knowledge, professional skills, and with an inclusive, global outlook, in eco-friendly ambience.
3. Promoting the capacity for critical thinking, communication, collaboration and creativity.
4. Instilling compassionate love towards all especially the poor and the marginalized.
5. Encouraging innovative research that will benefit humanity.
6. Inspiring the students to become life-long learners.
7. Creating an atmosphere conducive to the students imbibing spiritual and ethical values.
8. Providing top-up skills to enhance the employability quotient.
9. Providing state-of-the-art infrastructure.

Motto: सुखार्थाः सर्वभूतानां
സുഖാർത്ഥം: സർവ്വഭൂതാനാം

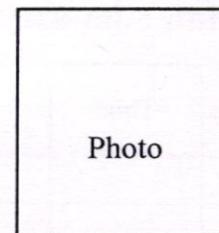


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PERSONAL PROFILE



Name :

Date of Birth :

Designation :

Department :

Phone :

WhatsApp No. :

ID No. :

Contact No. in case of emergency:

Academic qualifications :

Aadhaar No. :

KUHS ID No. : NUID

KNMC Reg. No. :

Blood Group :

Date of joining :

Membership in Professional Organizations:.....

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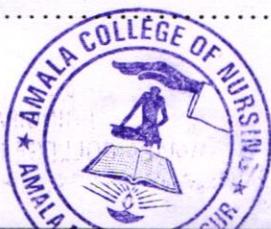
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Contact Address :

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E-mail ID :



MONTHLY ACTIVITIES

Month : January

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



HOD

4


Principal
Prof. Dr. RAJEE REGHUNATH
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MONTHLY ACTIVITIES

Month : February

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



HOD

5

(Signature)
Principal

Prof. Dr. RAJEE REGHUNATH
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MONTHLY ACTIVITIES

Month : March

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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6

[Signature]
Principal

Prof. Dr. RAJEE REGHUNATH
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MONTHLY ACTIVITIES

Month : April

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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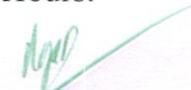
Total Practical / Lab Hours:

Signature of Faculty



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7


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MONTHLY ACTIVITIES

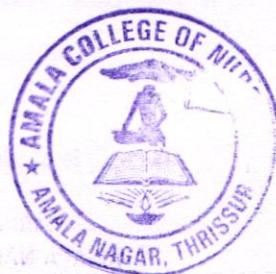
Month : May

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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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8


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MONTHLY ACTIVITIES

Month : June

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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9

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Principal

Prof. Dr. RAJEE REGHUNATH
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MONTHLY ACTIVITIES

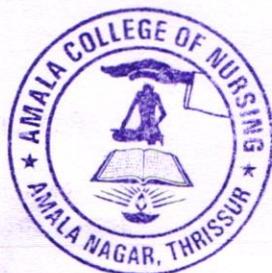
Month : July

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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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10

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Principal

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MONTHLY ACTIVITIES

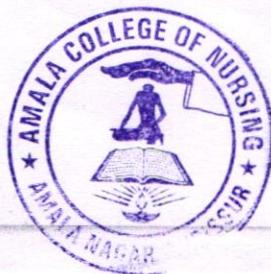
Month : August

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Total Theory Hours:

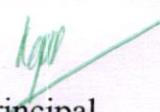
Total Practical / Lab Hours:

Signature of Faculty



HOD

11


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 AMALA NAGAR P.O., THRISSUR-680 555

MONTHLY ACTIVITIES

Month : September

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



HOD

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Principal


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MONTHLY ACTIVITIES

Month : October

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



HOD

13

[Signature]
Principal

Prof. Dr. RAJEE REGHUNATH

PRINCIPAL

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MONTHLY ACTIVITIES

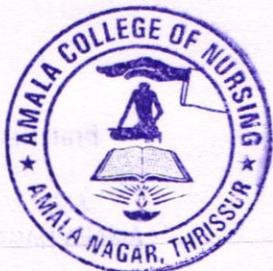
Month : November

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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14

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Principal

Prof. Dr. RAJEE REGHUNATH
PRINCIPAL
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MONTHLY ACTIVITIES

Month : December

Day	Time	Batch	Activities	No. of theory hours	No. of practical/ Lab hours	Sign
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Total Theory Hours:

Total Practical / Lab Hours:

Signature of Faculty



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15

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Principal

Prof. Dr. RAJEE REGHUNATH

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Research works guided

No.	UG, PG & PhD	Name of the student(s)	Project Title

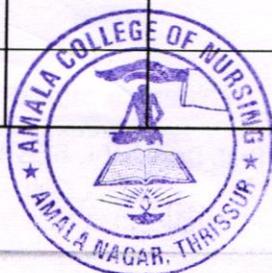
Details of Projects

Sl. No.	Name	Funding agency	Remarks
1			
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Resource Person

(Details regarding involvement as a resource person in workshops, seminars, symposium, conference, invited talk, and webinar)

No.	Date	Hours	Programme title & location	Organized by
1				
2				
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4				
5				



Seminars, webinars / conferences organized

Title of the Seminar	Regional / National / International	Co-ordinator / Committee Member	Duration

Publications

(Books, chapters, research papers published)

Item	Name	No.	International / National / State	Impact factor

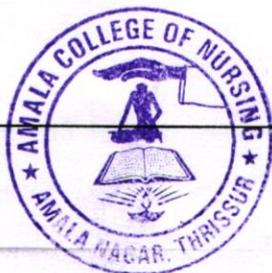
I hereby declare that the information given above is true to the best of my knowledge and belief.



Rajee
Name & Signature

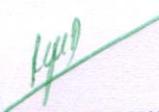
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NOTES



NOTES




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