## DAYANANDASAGAR COLLEGE OF ARTS SCIENCE AND COMMERCE

ShavigeMalleshwara Hills, Kaumarswamy Layout, Bangalore-560082 Internal Quality Assurance Cell (IQAC) Cell

## **Report of the Event Conducted**

Department: BBA/B.Com Date: 10/09/19

| SI. No. | Particulars                                                              | Event related I                            | Details |           | March de de la |
|---------|--------------------------------------------------------------------------|--------------------------------------------|---------|-----------|----------------|
| - 1.    | Event*                                                                   | ONAM CELEBRATION                           |         |           |                |
| 2.      | Title of the Event                                                       | FRESHERS' DAY AND TALENT DAY 2019          |         |           |                |
| 3.      | Date                                                                     | 07/09/2019                                 |         |           |                |
| 4.      | Time                                                                     | 10.00 am-1,30pm                            |         |           |                |
| 5.      | Venue                                                                    | Building no-13, Near Buddha statue.        |         |           |                |
| 6.      | Resource Person 1 Details** (Profile to be enclosed)                     | Mrs. Sara Kutti                            |         |           |                |
| 7.      | Topics Covered                                                           | Importance of the festival.                |         |           |                |
| 8.      | Resource Person 2 Details** (Profile to be enclosed)                     | Nil                                        |         |           |                |
| . 9.    | Topics Covered                                                           |                                            |         |           |                |
| 10.     | No. Faculty Participants(Enclose a copy of names with signatures)        | Internal:                                  | 20      | External: | Nil            |
| 11.     | No. Student Participants<br>(Enclose a copy of names<br>with signatures) | Internal:                                  | 100     | External: | Nil            |
| 12.     | Faculty Coordinator/s                                                    | Mrs. Shobha B.G, Mrs. Swati S, Mrs. Sneha. |         |           |                |
| 13.     | Student Coordinator/s                                                    | Vth BBA and B.Com (details enclosed)       |         |           |                |
| 14.     | Total Expenditure<br>(Details to be enclosed)                            |                                            |         |           |                |
| 15.     | Sponsors and Amount (if any)                                             | Nil                                        |         |           |                |
| 16.     | Agenda of the Event (Enclose a copy)                                     |                                            |         |           |                |
| 17.     | Report uploaded on college website? If yes, give details:                | . No                                       |         |           |                |
| 18.     | Report sent to media? If yes, give details:                              | No                                         |         |           |                |

| SI. No. | Particulars .                                                                                                                                | Event related Details |  |
|---------|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--|
| 19.     | Report uploaded in Social<br>Media? If yes, give details:                                                                                    | No                    |  |
| 20.     | Certificates Printed?<br>(Enclose a copy***)                                                                                                 | No                    |  |
| 21.     | Feedback Collected?<br>(Enclose a copy***)                                                                                                   | No                    |  |
| 22.     | Summary of the Event (Minimum 100 words)                                                                                                     | Attached              |  |
| 23.     | Photographs of the Event (At least 10 relevant, clear, and appropriate photos with title and explanation. The jpg files need to be attached) |                       |  |
|         |                                                                                                                                              |                       |  |
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| SI. No. | Particulars - | Event related Details |
|---------|---------------|-----------------------|
|         |               |                       |
|         |               |                       |

## Notes:

- \* Seminar / Workshop / Symposium / Conference / Cultural Fest / Quiz / Sports / Literature Fest, etc.
- \*\* Name / Organization / Designation / Area of Expertise
- \*\*\* Format Copy need to be attached and hard copy need to be filed

PS: Whichever column is not applicable, write as NA.

Mrs. Shobha B.G

**Event Coordinator** 

Car.

**HOD/Director** 

Principal