

6.3 Faculty Empowerment strategies (30)

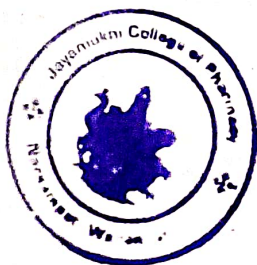
6.3.1 The Institution has effective welfare measures for teaching and non-teaching staff and avenues for career development progression. Provide the list of existing welfare measures for teaching and nonteaching staff in maximum of 500 words.

We as an Institution have evolved an excellent work culture of respecting each other and thus creating an ambience congenial for academic and personal growth. We believe that when the staff grows the Institution also grows. The institute has set high standards for imparting quality education and thus induct faculty with higher academic profiles, urge to excel in their respective fields and serve the students and the institution with dedication and high quality standards. All the faculty members inducted are qualified and competent teaching in all the academic courses. The institution has established a professional development allowance for a variety of academic activities for all levels and has encouraged faculty to participate in conferences, symposia, workshops, training programs etc. The institution provides seed money for research and also encourages the faculty to register for their Ph.D.

For the non teaching staff, the institution has organized computer proficiency up gradation programmes, training on equipment, preparation of reagents, cleaning and maintenance of glassware, equipment etc, to achieve the desired standards. The non teaching staff has been motivated to undergo for demonstration programmes to handle the equipment as per SOP.

Along with these, the institution provides welfare measures like:

- Incentives to teaching and non teaching staff on the basis of their performance.
- Research awards for well worthy projects and publications.
- Staff's pursuing higher studies are allowed to avail study leave for carrying out their examinations.
- Health insurance and accidental insurance as applicable.
- House loans and Provident fund to teaching and non teaching faculty. Salary advance, loans to desired teaching and non-teaching staff.
- Medical leave, supporting staff for hospital expenditure.
- Health insurance to one companion of non-teaching staff
- Research academic awards to teaching staff.

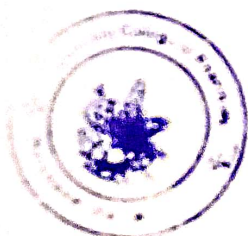



Principal

Jayamukhi College of Pharmacy
Narsampet-506 332

FACULTY EXCELLENCE AWARD

Date	Name	Event	Area of participation
10/07/2023	Dr Baswaraju Macha	Faculty excellence award	Academics
18/03/2023	Dr. M. Srilatha	Best Researcher award	Academics
20/09/2023	M. Dhanalaxmi	Faculty innovative research award	Best research award
06/10/2023	P. Anusha	Best Women scientist award	Academics
12/02/2024	I. Shalini	Excellence in academics	Academics
10/03/2024	Syeda nishat fathima	Best teacher award	Academics
15/04/2024	T. Ashwin	NSS Award	Services



Principal
Jayamukhi College of Pharmacy
Narsampet-506 332



GOVERNMENT OF TELANGANA STATE
TELANGANA TRIBAL WELFARE RESIDENTIAL DEGREE
COLLEGE (WOMEN) MAHABUBABAD: MAHABUBABAD-DIST
E-Mail tdttwrdegirls.mahabubabad@gmail.com

CERTIFICATE

This is to certify that Sri **Dr.MACHA.BASWARAJ**, Associate Professor, in
Jayamukhi College of Pharmacy has given a seminar on **Stereochemistry and
Applications** on 26.04.2023 and 28.04.2023 at TTWRDC W Mahabubabad,
Mahabubabad District.

Date: 28.04.2023

[Signature]
Principal
TTWR Degree College (G)
Mahabubabad-506 101
TTWRDC (W)
MAHABUBABAD



[Signature]
Principal
Jayamukhi College of Pharmacy
Narsimpet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name... Syeda... Nishat... Fathima.....
Designation; .. Asso. Prof..... Department: .Ph.'cology.
Mention reason for leave... Hypotension & Health issue.....
No. of Days: ...1.... From: 20/6/24..... To:
Arrangement of class Work.... G. Swetha.....

Signature of the Applicant

Date: 21/6/24

Place: Narsampet

Recommendation of the
Head of the Dept.

For Office Use Only

Eligibility of C.L.

(Before taking Principal's signature for leave, fill the below given details from Accountant)

Mr/Ms: Designation:.....
is having..... Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.


Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

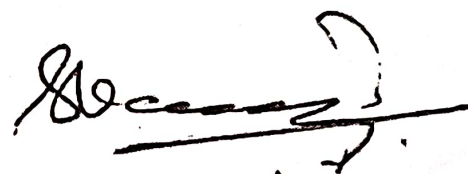
APPLICATION FORM FOR CASUAL LEAVE

Name..... I. Shalini
Designation; .. Assistant professor Department: pharm. Analysis
Mention reason for leave..... Fever
No. of Days: 02... From: 19.06.2024... To: 20.06.2024...
Arrangement of class Work..... Anusha madam

Signature of the Applicant Shalini

Date: 21/06/2024

Place: Narsampet.



Recommendation of the
Head of the Dept.

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Office Superintendent.

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Principal
Jayamukhi College of Pharmacy
Narsampet-506332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... Dr. Srilatha Malvey.....
Designation; Asst. Professor..... Department: Pharmacology
Mention reason for leave..... Grand mother sick.....
No. of Days: ..5.... From: ..4.11.2024.... To: ..8.11.2024....
Arrangement of class Work.....

Signature of the Applicant



Date: 2/11/2024

Place: JCP.

Recommendation of the

Head of the Dept.

*Sunder -
Note this -*

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(Before taking Principal's signature for leave, fill the below given details from Accountant)

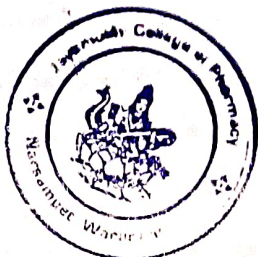
Mr/Ms: Designation:
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Office Superintendent.

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Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. Warangal - 506 332 (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... M. Anil Kumar
Designation; ... Asst. professor Department: pharmacology
Mention reason for leave..... personal, medical, E.M.R.
No. of Days: .. half day From: ... 24-10-24 ... To: ... 24-10-24
Arrangement of class Work..... ROLLER

Signature of the Applicant 

Date: 24/10/24

Place: Narsampet



Recommendation of the
Head of the Dept.

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from Accountant)

Mr/Ms: Designation:
is having..... Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.



Principal

Jayamukhi College of Pharmacy

Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist.: Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name.....Dr.Srilatha.malvey.....
Designation;Asst.professor.....Department: Pharmaceutical
Mention reason for leave.....HealthProblem.....
No. of Days: ..1....From: ..one.. 21/10/2024..To:
Arrangement of class Work.....

Signature of the Applicant



Date: 23/10/2024

Place: JCP.



Recommendation of the
Head of the Dept.

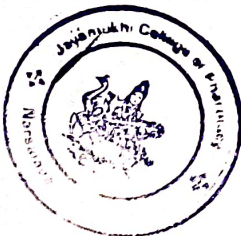
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Principal
Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... I. Shalini
Designation: ... Assistant Professor Department: Pharm. Analysis
Mention reason for leave..... Health Issue
No. of Days: 07 From: ... 14.10.2024 To: ... 14.10.2024
Arrangement of class Work..... Night man, Arul man

Signature of the Applicant I. Shalini

Date: 15/10/2024

Place: Narsampet

Recommendation of the
Head of the Dept.

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Eligibility of C.L.

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Office Superintendent.

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[Signature]
Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... T. Ashwin Kumar
Designation; Asst. Professor Department: Pharmaceutics
Mention reason for leave..... Health Problem.....
No. of Days: ...1..... From: 21/09/2024 To: 21/09/2024.....
Arrangement of class Work..... Santosh.....

Signature of the Applicant Ashwin

Date: 24/09/2024

Place:


Recommendation of the
Head of the Dept.

For Office Use Only

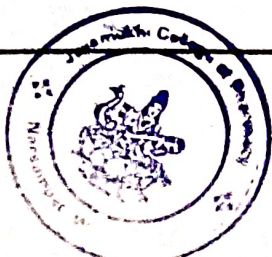
Eligibility of C.L.

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Office Superintendent.

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Principal

Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name: Dr. Syeda... Nishat... Fathima
Designation: Asso. Prof. Department: Ph. cology
Mention reason for leave: Health Issues
No. of Days: 1 From: 23-7-24 To: -
Arrangement of class Work: P. Anusha

Signature of the Applicant

Date: 25/7/24

Place: Narsampet

Recommendation of the
Head of the Dept.

For Office Use Only

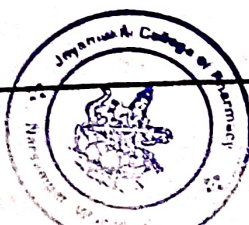
Eligibility of C.L.

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Mr/Ms: Designation:
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Office Superintendent.

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Principal
Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

APPLICATION FORM FOR CASUAL LEAVE

Name.....I. Shalini
Designation: Assistant Professor Department: Pharm. Analysis
Mention reason for leave.....Health issue
No. of Days: 01 From: 20.07.2024 To: 20.07.2024
Arrangement of class Work.....Nishat. Madam

Signature of the Applicant Shalini

Date: 22/07/2024

Place: Narsampet

[Signature]
Recommendation of the
Head of the Dept.

For Office Use Only

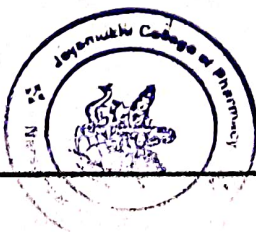
Eligibility of C.L.

(Before taking Principal's signature for leave, fill the below given details from Accountant)

Mr/Ms: Designation:
is having Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.



[Signature]
Principal

Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name.....I. Shalini.....
Designation: ...Assistant professor... Department: pharm. Analysis
Mention reason for leave.....Fever, Cold, Cough.....
No. of Days: 03..From: 30.07.2024... To: 01.08.2024
Arrangement of class Work...Nishat madam, Anula madam.....

Signature of the Applicant Shalini

Date: 02/08/2024

Place: Narsampet

[Signature]
Recommendation of the
Head of the Dept.

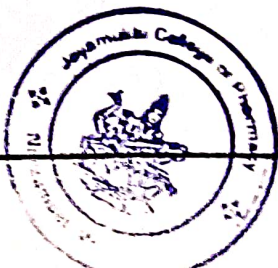
For Office Use Only Eligibility of C.L.

(Before taking Principal's signature for leave, fill the below given details from Accountant)

Mr/Ms: Designation:
is having..... Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.



[Signature]

Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist : Warangal - 506 332 (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name... M. Dhanalakshmi
Designation; ... Ass. prof Department: Ph: chemistry
Reason for leave... fever
No. of Days: 01 From: 27/07/24 To: 27/07/24
Arrangement of class Work.....

Signature of the Applicant

Date:

Place:

Recommendation of the
Head of the Dept.

For Office Use Only Eligibility of C.L.

(Before taking Principal's signature for leave, fill the below given details from Accountant)

Mr/Ms: Designation:
having Days C.L/C.C.L. at his/her credit.

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Principal
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Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... I. Shalini
Designation: Assistant professor Department: Pharm. Analysis
Mention reason for leave..... Health Issue
No. of Days: 02 From: 09.07.2024 To: 09.07.2024
Arrangement of class Work..... Anusha Madam

Signature of the Applicant Shalini

Date: 10/07/2024

Place: Narsampet

—CL—
Shalini
Recommendation of the
Head of the Dept.

For Office Use Only

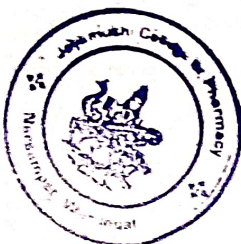
Eligibility of C.L.

Before taking Principal's signature for leave, fill the below given details (from Accountant)

Mr/Ms: Designation:
is having Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / NotSanctioned.



Shalini
Principal
Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... I. Shalini
Designation; Assistant Professor Department: Pharm. Analysis
Mention reason for leave..... Fever
No. of Days: 02 From: 21.02.2024 To: 22.02.2024
Arrangement of class Work..... Anusha nam, Sneha maa

Signature of the Applicant Shalini

Date: 24/2/2024

Place: Narsampet

Recommendation of the
Head of the Dept.

For Office Use Only

Eligible for C.L.

(After obtaining Principal's signature reference, fill the below given details from Accountant)

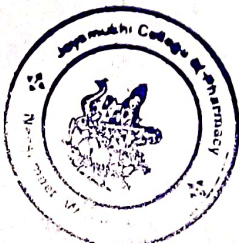
Mr/Ms: Designation:
is having Days C.L./C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.

Shalini
Principal

Jayamukhi College of Pharmacy,
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name... Ch. Rathnakar Rao.....
Designation: Pharmacy Store In-charge Department: Pharmacy.....
Mention reason for leave... Father's Death Anniversary.....
No. of Days: 03.. From: 25/01/2024..... To: 29/01/2024.....
Arrangement of class Work..... Sunder Sir.....

Signature of the Applicant

Date: 29/01/2024

Place: Narsampet

[Signature]

Recommendation of the
Head of the Dept.

For Office Use Only

Eligibility of C.L.

(Before taking Principal's signature for leave, fill the below given details from Accountant)

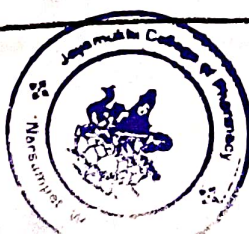
Mr/Ms: Designation:
is having..... Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.

[Signature]
Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name.. Dr. G. Vennela
Designation: Asst. Professor.....Department: Pharmacy
Mention reason for leave..... Engagement ceremony
No. of Days: 7.....From: 28/12/2023.....To: 28/12/23
Arrangement of class Work..... Smitha man

Signature of the Applicant

Date: 27/12/23

Place: Narsampet

Recommendation of the

Head of the Dept.

For Office Use Only

Eligibility of C.L.

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Mr/Ms:Designation:.....
is having.....Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.

Signature

Principal

Jayamukhi College of Pharmacy
Narsampet, 506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... G. Swetha
Designation: Asst. professor Department: pharmacology
Mention reason for leave..... Health issue
No. of Days: ..1..... From: 7/12/2023 To:
Arrangement of class Work..... Anusha mam

Signature of the Applicant

Date:

Place:

Swetha

8/12/2023

[Signature]

Recommendation of the
Head of the Dept.

For Office Use Only Eligibility of C.L.

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Mr/Ms: Designation:
is having Days C.L/C.C.L. at his/her credit.

Office Superintendent.

Leave applied by the above individual is Sanctioned / Not Sanctioned.

[Signature]
Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332 (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... K. Vishnu.....
Designation: Lab. Asst. Department: Pharmacy
Mention reason for leave..... FEVER
No. of Days: 2..... From: 6/12/2023 To: 07/12/2023
Arrangement of class Work..... Assign

Signature of the Applicant Vishnu

Date: 08/12/2023

Place: Narsampet

[Signature]

Recommendation of the
Head of the Dept.

For Office Use Only Eligibility of C.L.

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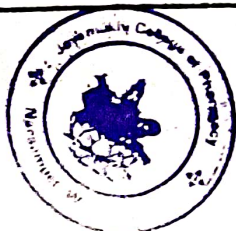
Mr./Ms: Designation:
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Office Superintendent

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[Signature]
Principal

Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name.....¹⁰ Dr. Baswaraju Mahe.....
Designation; ... Asst. Professor..... Department: ... Pharmacy
Mention reason for leave..... Father's Health Issues.....
No. of Days: From: ... 18-12-2024 ... To: ... 19-12-2024 ...
Arrangement of class Work..... Assigned.....

Signature of the Applicant

Date: 17-12-2024

Place: Narsampet

Recommendation of the
Head of the Dept.

For Office Use Only Eligibility of C.L.

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Mr/Ms: Designation:.....
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Office Superintendent.

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Principal

Jayamukhi College of Pharmacy
Narsampet-506 332

JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. : Warangal - 506 332. (T.S.)

APPLICATION FORM FOR CASUAL LEAVE

Name..... T. Ashwin Kumar
Designation; Asst. Professor..... Department: Pharmaceutics
Mention reason for leave..... Suffering from fever
No. of Days: 1..... From: 02/11/24..... To: 02/11/24
Arrangement of class Work..... Rakesh, Smitha

Signature of the Applicant

Date:

Place:

Recommendation of the
Head of the Dept.

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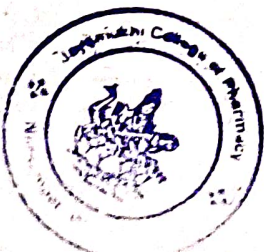
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Jayamukhi College of Pharmacy
Narsampet-506 332



JAYAMUKHI COLLEGE OF PHARMACY

NARSAMPET, Dist. Warangal - 506 332 (T.S.)

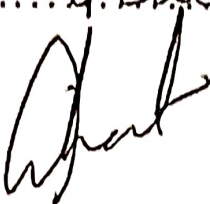
APPLICATION FORM FOR CASUAL LEAVE

Name....Syeda....Nishat....Fathima.....
Designation: ...Asso. Prof.....Department: Ph'cology..
Reason for leave..Maternal..Ant. Expired..attended..General..
No. of Days: ...4...From: ...11.6.24.....To: ...14.6.24.....
Arrangement of class Work....G: Sweetha.....

Signature of the Applicant

Date: 15.6.24

Place: Narsampet



Recommendation of the
Head of the Dept.

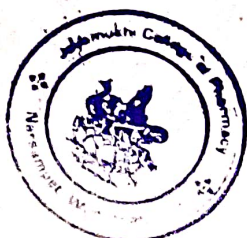
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Ms:Designation:.....
is having.....Days C.L/C.C.L. at his/her credit.

Office Superintendent.

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Jayamukhi College of Pharmacy
Narsampet-506 332