

QIP
Quality Improvement
Programme
AICTE/MHRD

1. Title of the Short Term Course (STC)

INDIAN INSTITUTE OF TECHNOLOGY GUWAHATI CENTRE FOR EDUCATIONAL TECHNOLOGY

Office of the Coordinator QIP Curriculum Development Cell

Short Term Course -Application for Project/Course proposal

2. (a) Department proposing the Short Term Course	:	
(b) Name and address of the Principal faculty (Maximum two only)	:	
(c) Other Departments/ agencies planned to associated for conducting/ supporting the Short Term Course	:	
3. Proposed Faculty/ Invited experts	:	
4. Scope and objective of the proposal clearly bringing out the need to organise the Short Term Course and the topic to be covered.	:	
5. Importance of the proposal	:	
6. Duration of the Short Term Course (and the proposed dates)	:	
7. How will these induction training programme(s) going to benefit Teachers? (Not Exceeding Fifty words).	:	
8. Whether Principal Faculty has offered such STC previously? Or planning to apply elsewhere. If yes, please give details i.e. Title, dates, funding agency, etc.	:	
9. Chronological list of previous applications made (if any) and were not alloted .	(i) (ii) (iii)	
Principal Faculty		
Signature:		Recommended/ Not recommended
organicure.		Head of Department/Centre
Date: DD/MM/YYYY		Signature:
Place		Date: DD/MM/YYYY
 Allotment and number of courses is based on limitations of grants available with QIP-CET. 		

In case of multiple applications from a department /centre the applications would be prioritized based on

(i) Previous attempts (ii) Receipt date of applications at CET (iii) In consultation with HOD