VIGNAN'S

INSTITUTE OF MANAGEMENT AND TECHNOLOGY FOR WOMEN

(AN AUTONOMOUS INSTITUTION)

INSTITUTIONAL POLICY MANUAL

Compendium of Institutional Policies Aligned with AICTE / UGC Norms

Table of Content

Preface

This Policy Manual consolidates the institutional policies of VMTW College governing academic, administrative, research, student welfare, infrastructure, and sustainability functions. Each policy has been framed with reference to the applicable norms and regulations of the All India Council for Technical Education (AICTE) and the University Grants Commission (UGC), as well as directives of the affiliating University and the National Education Policy (NEP) 2020, wherever applicable.

Each policy in this manual follows a standard structure comprising Objective, Scope, Policy Statement, Responsibilities, Procedure, Minimum Compliance Requirements, Documentation, Review Cycle, and Approval Authority, to ensure ease of reference, implementation, and audit.

This manual shall be read in conjunction with the College's Statutes, service rules, and applicable regulatory circulars. In the event of any conflict between a policy herein and a subsequent statutory or regulatory provision, the statutory/regulatory provision shall prevail, and the concerned policy shall be deemed amended to that extent pending formal revision.

All Heads of Departments, Committee Chairpersons, and Section Heads are responsible for ensuring awareness and implementation of the relevant policies within their jurisdiction.

Issuing Authority: Governing Body, VMTW College

POLICY 1

Administrative Manual

Document Code: VMTW/POL/01

SERVICE RULES

1. Preamble:

1. The service rules shall be called as "Vignan's Institute of Management And Technology for Women", Service Rules. These rules shall super cede the existing service rules.
2. They shall be deemed to have come into effect and shall apply to all the employees of the institute as per their date of joining.

2. Definition

1.'Institute' means, "Vignan's Institute of Management and Technology For Women, Kondapur, Hyderabad.

2.'Management' means The Management Committee of the institute constituted as per A.I.C.T.E. Norms.

3. 'Governing Body' means The Governing Body of the institute" constituted as per A.I.C.T.E. Norms. a. Note: Constitution of Governing Body - It shall have a Senior Faculty Member of the teaching staff as a representative.

4. 'Chairman' means The Chairman of the Managing Committee /The Governing Body of the institute.

5. Secretary & Correspondent' means The Secretary & Correspondent of the institute.

6. University' means "J.N.T. University, Hyderabad".

7. 'Principal' means The Principal of the institute or any other person authorized by the 'Management to discharge the duties and responsibilities of the Principal whatever may be his/her designation, otherwise.

8. 'Employee means a person who is employed by the institute including Principal excluding those who are engaged on part time basis or daily wages.

9. 'Vacation' means any recess in an academic year, which is for a minimum period of 2 weeks.

10. 'Vacation Staff' means employees who are allowed to avail vacation. All other employees are deemed to be non-Vacation staff.

11. Teaching staff comprises the following categories:

    a. Principal

    b. Deans

    c. Professors

    d. Associate Professors

    e. Assistant Professors

    f. Librarian

    g. Physical Education Director

    h. Women Protection Force

    i. Any other category of post declared by the Management / Principal

12. 'Technical Staff' comprises the following categories:
    a. System Administrator
    b. Programmers, Asst. Programmers, Computer Operators
    c. Technicians and Lab assistants
13. 'Non - Teaching staff means those staff that are categorized as follows:

Office:

a. Administrative Officer (Admin / Academic)
b. Accounts Officer
c. PA to Principal
d. Accountant
e. Cashier/Accounts Clerk
f. Office Assistant - Staff Related Functions
g. Office Assistant - scholarship and liaison
h. Office Receptionist / Telephone Operator
i. Electrician

Group IV employees / Contingent staff

a. Watchman / Security

b. Gardner

c. Sweepers etc.

14. Competent Authority - Chairman/ Secretary & Correspondent in the case of Principal and Principal in the case of all other employees.
15. "Duty" - an employee is said to be on duty for the purpose of service benefits:

a. When the employee is discharging the duties of the post to which he / she is appointed or he/she is undergoing training prescribed for the post.

b. When the employee is absent from duty on authorized holidays, on permitted vacation or when availing any leave sanctioned by the competent authority.

c. When the employee is attending conferences, seminars, workshops, refresher courses, orientation courses, quality improvement programs, etc., duty permitted by competent authority, and

d. When the employee is attending to the work assigned by the competent authority in the interest of institute / Management.

e. "Leave" means leave granted by competent authority to an employee to which he / she is eligible.

f. "Pay" means basic pay in the time scale or basic pay with a special pay/allowance the case may be. "Year" means calendar year / financial year/ academic year as the case may be.

3. SCOPE

This policy applies to all administrative offices, sections, and support staff of the College, including academic administration, establishment, accounts, stores, and student services.

4. POLICY STATEMENT

- The College shall maintain a documented administrative structure with clearly defined hierarchy, reporting relationships, and delegation of financial and administrative powers, sanctioned by the Governing Body/Management.
- All administrative processes shall be conducted in accordance with the Institution's Statutes, AICTE Approval Process Handbook, and applicable University ordinances.

5. RESPONSIBILITIES

Role	Responsibility
Principal/Director	Overall administrative control and compliance with regulatory norms.
Registrar/Administrative Officer	Day-to-day administrative operations, record maintenance, and correspondence.
Heads of Department	Departmental administrative compliance and reporting to the Principal
Section Heads (Accounts, Establishment, Stores)	Functional compliance within respective sections.

6. PROCEDURE

1. Each administrative section shall maintain a Standard Operating Procedure (SOP) file approved by the Principal.
2. All incoming and outgoing correspondence shall be logged through the central registry with unique reference numbers.
3. Delegation of powers shall be reviewed and notified annually through an official circular.
4. Administrative decisions above the delegated authority shall be routed to the Governing Body through the Principal.

7. MINIMUM COMPLIANCE REQUIREMENTS

a. Maintenance of an updated organogram displayed and available on record.

b. Annual administrative audit as per AICTE norms.

c. Compliance with statutory registers (attendance, leave, service books, asset registers).

8. DOCUMENTATION

Administrative SOP file; Delegation of Powers circular; Office Order register; Annual Administrative Report.

9. REVIEW CYCLE

Once every two years, or earlier upon regulatory amendment by AICTE/UGC/University.

10. APPROVAL AUTHORITY

Governing Body, on recommendation of the Principal.

POLICY 2

Intellectual Property Rights (IPR) Policy

Document Code: VMTW/POL/02

1. OBJECTIVE

To encourage and protect the creation, disclosure, and commercialization of intellectual property generated by faculty, staff, and students, in line with the National IPR Policy 2016 and AICTE Innovation Cell guidelines.

2. SCOPE

Applicable to all inventions, designs, copyrights, trademarks, and other intellectual property created using institutional resources, funding, or facilities by faculty, staff, students, and research scholars of VMTW College.

3. POLICY STATEMENT

a. All IP created substantially using College resources shall be jointly owned by the College and the inventor(s)/creator(s), unless otherwise agreed in writing.

b. The College shall facilitate patent filing, copyright registration, and technology transfer through its IPR Cell.

c. Revenue sharing from commercialized IP shall follow the ratio prescribed in the IPR Cell Charter, with due credit to inventors.

4. RESPONSIBILITIES

Role	Responsibility
IPR Cell Coordinator	Screening disclosures, coordinating filing, and maintaining the IP register.
Inventor/Creator	Timely disclosure of IP through the prescribed Invention Disclosure Form.
IIC/Research Committee	Evaluating commercial viability and recommending filing support.

5. PROCEDURE

1. Inventor submits Invention Disclosure Form to the IPR Cell within 30 days of conception.
2. IPR Cell conducts prior-art search and feasibility assessment.
3. Decision on filing is communicated within 60 days; if approved, patent attorney is engaged.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. Functional IPR Cell with a notified coordinator.

b. Maintenance of an Institutional IP Register.

c. At least annual awareness sessions on IPR for faculty and students.

7. DOCUMENTATION

Invention Disclosure Form; IP Register; Patent/Copyright filing records; Revenue-sharing agreements.

8. REVIEW CYCLE

Every three years, or upon change in National IPR Policy.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the IPR Cell and Principal.

POLICY 3

Recruitment and Promotion Policy

Document Code: VMTW/POL/03

1. OBJECTIVE

To ensure transparent, merit-based, and equitable recruitment and promotion of teaching and non-teaching staff in accordance with AICTE Faculty Norms, UGC Regulations 2018, and reservation policies of the Government.

2. SCOPE

Applicable to recruitment and promotion of all regular, contractual, and visiting faculty, and non-teaching staff of VMTW College.

3. POLICY STATEMENT

- Recruitment shall be conducted only against sanctioned vacancies through open advertisement, ensuring due representation as per reservation norms.
- Minimum qualifications and experience shall strictly follow the AICTE/UGC prescribed norms for the respective cadre.
- Promotions shall be based on the Career Advancement Scheme (CAS) or Institutional Promotion Policy, subject to performance appraisal.

4. RESPONSIBILITIES

Role	Responsibility
Selection Committee	Conducting fair evaluation as per statutory composition norms.
HR/Establishment Section	Advertisement, documentation, and verification of credentials.
Governing Body	Final approval of appointments and promotions.

5. PROCEDURE

1. Identification of vacancy and approval by Governing Body.
2. Advertisement in newspapers/portals as per AICTE norms, minimum 31 days notice.
3. Screening of applications, followed by written test/demonstration and interview.
4. Selection Committee recommendation placed before Governing Body for approval.
5. Issuance of appointment letter and probation as per service rules.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. Selection Committee composition as per AICTE/UGC norms including subject expert and reservation category expert.

b. Verification of qualifications through original certificates and API/PBAS score sheets where applicable.

7. DOCUMENTATION

Advertisement copy; Selection Committee minutes; Appointment letters; API/PBAS score sheets.

8. REVIEW CYCLE

Annually, or upon amendment of AICTE/UGC/JNTUH recruitment norms.

Si No	Present Designation	To the position aspired	Eligibility criteria	Basic scale fixation as on date	Remarks / suggestions
1	Asst. Professor AGP Rs. 6000	Fresh appointment	BE/B.Tech with First class and ME/M.Tech/M.Phil first class	15600-39100 with AGP Rs 6000	Deserving candidates are entitled for two non-compounded increments at entry level
			BE/B.Tech with First class; ME/M.Tech/M.Phil First class and obtained Ph.D degree recognized by UGC* in relevant discipline	15600-39100 with AGP Rs 6000	Entitled to five non compound increments at entry level
2	Asst. Professor AGP Rs 6000	Asst Professor with AGP of Rs 700O	Completed 5 years of service as Asst. Prof. with BE/B.Tech with First class and ME/M.Tech/M.Phil First class qualifications at entry	15600-39100 with AGP Rs 7000	Should have attended minimum Three weeks of FDP / STTP during Asst Professor with AGP of Rs. 6000
			Completed 4 years of service as Asst. Prof. with BE/B.Tech with First Class: ME/M.Tech/ M.Phil First class and obtained Ph.D degree recognized by UGC* in relevant discipline qualifications at entry	15600-39100 with AGP Rs 7000	Should have attended minimum Two weeks of FDP/STTP during Asst Professor with AGP of Rs 6000+minimum one research paper in peer reviewed journal
3	Asst. Professor with AGP of Rs 7000	Associate Professor	Should process Ph.D degree recognized by UGC+ Minimum of five years of teaching experience of which two years of post Ph.D.	37400-67000+AGP Rs 9000	Should be guiding minimum one Ph.D student and possess minimum one post Ph.D publication in international

			experience is essential		journal of repute in the relevant field
4	Associate Professor	Professor AGP Rs 10000	Qualifications as required of the post of Associate Professor + Minimum of 10 years teaching experience of which at least 5 years should be at the level of Associate Professor	37400-67000+ AGP Rs 10000	Should be guiding minimum one Ph.D student and possess minimum one post Ph.D publication in International Journal of repute in the relevant field during last one vear.
5	Professor AGP Rs 10000	Professor AGP Rs 12000	Qualifications as required for the post of Professor + at least 10 years of teaching as Professor and postdoctoral work of a high standard + publications in peer reviewed/referred Research Journals	7400-67000+AGP Rs 12000	Should be guiding minimum one Ph.D student and possess minimum one post Ph.D publication in International Journal of repute in the relevant field during last one year

I. Revised Pay Fixation for In-Service Faculty (For Existing Faculties on Roll As On 01-01-2022)

II. Policies for Career Advancement

Note: All faculties can avail the facility of merit incentive as per revised policy for their publications published from 01-05-2022 onwards.

9. APPROVAL AUTHORITY

Governing Body. and principal

POLICY 4

Faculty Performance Analysis Policy

Document Code: VMTW/POL/04

1. OBJECTIVE

To establish a systematic, objective mechanism for evaluating faculty performance in teaching, research, and institutional contribution, in alignment with the UGC API/PBAS framework.

Performance appraisals are essential for the effective management and evaluation of faculty. Appraisals help develop individuals, improve organizational performance, and feed into academic planning. It generally reviews each individual's performance against objectives and outcomes set by the institution.

Performance appraisals are important for faculty motivation, attitude and behaviour development, communicating and aligning individual and organizational aims, and fostering positive relationships between management, staff and students. Performance appraisals provide a formal, recorded, regular review of an individual's performance, and a plan for future development.

Criterion 5 of NBA, the accreditation body for engineering programs, focuses on faculty members. It states that "The faculty is the heart of any educational program. The faculty must be of sufficient number and must have the competencies to cover all of the curricular areas of the program. There must be sufficient faculty to accommodate adequate levels of student faculty interaction, student advising and counselling, institute service activities, professional development, and interactions with industrial and professional practitioners, as well as employers of students.

Also on similar grounds, NAAC Criterion 2 Teaching - Learning and Evaluation; NAAC Criterion 3 Research, Innovations and Extension; NIRF India Ranking; ARIIA Ranking and QS-I Gauge Rating.

The Faculty Self Appraisal and evaluation system has the following main objectives:

i. Helping faculty members to recognize the areas in need of development or improvement,

and to capitalize on their areas of strength.

ii. Building a database that can be used for promotion applications.

iii. Helping the institute set a program for faculty development.

iv. Creating a fair indication for annual merit increases and other rewards programs to be developed.

2. SCOPE

Applicable to all regular teaching faculty of VMTW College.

3. POLICY STATEMENT

- Faculty performance shall be evaluated annually on parameters of teaching effectiveness, research output, professional development, and institutional/extension activities.
- Performance outcomes shall inform annual appraisal, increments, and eligibility for CAS promotion.

4. RESPONSIBILITIES

Role	Responsibility
IQAC/Performance Appraisal Committee	Designing evaluation tools and consolidating results.
Heads of Department	Departmental data collection and first-level review.
Individual Faculty	Submission of Self-Appraisal Report (SAR) with supporting evidence.

5. PROCEDURE

I. Faculty submits SAR at the end of each academic year through the prescribed format.
II. Student feedback and peer review inputs are compiled by IQAC.
III. HOD reviews and forwards consolidated report to the Performance Appraisal Committee.
IV. Committee finalizes scores and communicates outcomes to faculty and Principal.

6. MINIMUM COMPLIANCE REQUIREMENTS

I. Minimum 80% student feedback response rate per course.
II. SAR submission within stipulated deadline each year.
III. Use of standardized API/PBAS proforma.

7. DOCUMENTATION

Self-Appraisal Reports; Student feedback records; Performance Appraisal Committee minutes; Consolidated score sheets.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Principal, based on Performance Appraisal Committee recommendation; Governing Body for policy-level changes.

POLICY 5

Innovation and Start-Up Policy

Document Code: VMTW/POL/05

1. OBJECTIVE

To foster an entrepreneurial ecosystem within the College that nurtures student and faculty innovation, incubation, and start-up creation, in line with AICTE Institution's Innovation Council (IIC) guidelines and the Start-up India initiative.

The main objectives of IISP:

1. To nurture the culture of innovation at institute and across the state.
2. To assist and expedite the development of innovations into prototypes with emphasis on socioeconomic effect and market demand.
3. To identify potential and prospective entrepreneurs among the students as well as faculty and provide them a platform to be successful.
4. To act as a catalyst for swift commercialization of technology developed by novice entrepreneurs.
5. To create a nexus between the academic, R & D institutions, industries and financial institutions.

2. SCOPE

Applicable to all students, faculty, and staff of VMTW College engaged in innovation, incubation, or entrepreneurship activities.

3. POLICY STATEMENT

- The College shall operate an Institution's Innovation Council (IIC) to plan and monitor innovation and entrepreneurship activities throughout the academic year.
- Seed support, mentoring, and incubation facilities shall be extended to viable student/faculty start-up ideas, subject to availability of resources.
- Strategies and Governance for promoting Innovation and Entrepreneurship
- Product Ownership Rights of all Technologies Developed at Institute
- Organizational Capacity, Human Resources and Incentives
- Creating Innovation Pipeline and Pathways for Entrepreneurs at Institute Level
- Academic flexibility (e.g., credit for entrepreneurial activity, attendance relaxation) may be granted to student entrepreneurs as per applicable University provisions.
- Entrepreneurial Impact Assessment

4. RESPONSIBILITIES

Role	Responsibility
IIC President/Convener	Planning annual activity calendar and reporting to AICTE IIC portal.
Innovation and Start-up Cell	Screening ideas, mentoring, and connecting with incubators/investors.
Students/Faculty Innovators	Pursuing ideas through prescribed stage-gate process.

5. PROCEDURE

1. Idea submission through the Cell's intake form.
2. Preliminary screening and mentor allocation.
3. Proof-of-concept support and periodic milestone review.
4. Facilitation of incubation, funding linkage, or IPR filing as applicable.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Functional IIC registered on the AICTE portal with minimum prescribed annual activity score.
- At least one innovation/entrepreneurship awareness activity per semester.
- Maintenance of start-up/idea tracking register.

7. DOCUMENTATION

IIC activity calendar and reports; Idea/start-up tracking register; Mentorship records; AICTE IIC portal submissions.

8. REVIEW CYCLE

Annually, aligned with the AICTE IIC academic calendar.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the IIC President and Principal.

POLICY 6

Research Promotion Policy

Document Code: VMTW/POL/06

1. OBJECTIVE

To promote a vibrant research culture among faculty and students, encouraging quality publications, funded projects, and collaborative research, consistent with UGC research promotion norms.

2. SCOPE

Applicable to all faculty, research scholars, and students engaged in research activity at VMTW College.

3. POLICY STATEMENT

- The College shall provide financial and administrative support for research proposal development, conference participation, and publication in UGC-CARE listed/peer-reviewed journals.
- Research output shall be duly recognized in performance appraisal and promotion processes.
- Ethical research conduct and adherence to plagiarism norms shall be mandatory for all research activity.

4. RESPONSIBILITIES

Role	Responsibility
Research Committee/Dean R&D	Reviewing proposals and monitoring research output.
Faculty/Research Scholars	Conducting research ethically and reporting outcomes.
IQAC	Tracking institutional research metrics for accreditation.

5. PROCEDURE

1. Faculty submits research proposal/seed money application to the Research Committee.
2. Committee evaluates and recommends approval with budget allocation.
3. Periodic progress reporting during the project tenure.
4. Completion report and publication details submitted on conclusion.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Institutional seed money scheme with defined annual budget.
- Plagiarism check (similarity index as per UGC norms) mandatory before submission of any thesis/paper.
- Annual research output reporting to IQAC/Principal.

7. DOCUMENTATION

Research proposal files; Seed money sanction orders; Publication records; Plagiarism check reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the Research Committee.

POLICY 7

Open Educational Resources (OER) Policy

Document Code: VMTW/POL/07

1. OBJECTIVE

To promote the creation, adoption, and sharing of Open Educational Resources to enhance access to quality learning material, in line with UGC OER Guidelines and NEP 2020.

2. SCOPE

Applicable to all faculty and departments developing or using teaching-learning material at VMTW College.

3. POLICY STATEMENT

- Faculty are encouraged to develop and share OER (e-content, video lectures, question banks) under open licences such as Creative Commons.
- The College shall host an institutional repository for OER content accessible to students and faculty.
- Use of pirated or unauthorized copyrighted material in teaching is strictly prohibited.

4. RESPONSIBILITIES

Role	Responsibility
IQAC/E-Content Cell	Coordinating OER development and repository management.
Faculty	Contributing quality-reviewed OER content each semester.
Librarian	Curating and archiving OER materials.

5. PROCEDURE

1. Faculty develops content as per prescribed template and licensing declaration.
2. Content reviewed by departmental committee for accuracy and originality.
3. Approved content uploaded to institutional repository/LMS.
4. Usage statistics reviewed annually by IQAC.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Minimum OER contribution per faculty per academic year as fixed by IQAC.
- All OER content licensed under Creative Commons or equivalent.
- Repository accessible on institutional LMS/website.

7. DOCUMENTATION

OER repository records; Content review committee minutes; Licensing declarations.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Academic Council, on recommendation of IQAC.

POLICY 8

Plagiarism Policy

Document Code: VMTW/POL/08

1. OBJECTIVE

To uphold academic integrity by preventing and addressing plagiarism in research, dissertations, and academic submissions, in strict compliance with the UGC (Promotion of Academic Integrity and Prevention of Plagiarism in Higher Educational Institutions) Regulations, 2018.

2. SCOPE

Applicable to all faculty, research scholars, and students submitting theses, dissertations, project reports, and research papers.

3. POLICY STATEMENT

- All theses, dissertations, and research papers shall be checked for similarity using UGC-approved plagiarism detection software prior to submission. (Drill Bit)
- Similarity index thresholds shall strictly follow UGC 2018 Regulations (e.g., not exceeding 10% for core content, excluding references/bibliography).
- Cases exceeding permissible limits shall be referred to the Departmental Academic Integrity Panel for action as per prescribed penalty structure.

The following are the policy decisions made:

a. All the UG and PG coordinators are added as instructors and they are provided with an account in
b. TURNITIN with username and password. Training will be given for all the instructors on how to use
c. TURNITIN Tool by the TURNITIN administrator.
d. The entire UG and PG thesis should be tested by the respective Head of the departments before the Exam Branch
e. students submit hardcopy of their thesis to the Research and Development Centre/HOD.
f. Considering the diversity of the various programs offered in the institute, the level of plagiarism can
g. be decided by the respective departments, though 30% can be the maximum level of admissible
h. similarity in any department.
i. Each student shall be instructed to furnish an undertaking indicating that the thesis has been prepared
j. by him or her and that the document is his/her original work and free of any plagiarism.
k. Each supervisor shall submit a certificate indicating that the work done by the student under him/her
l. is plagiarism free.
m. Any violations in this regard should be taken to the knowledge of the Principal for necessary
n. disciplinary action. R & D Team constituted by the Principal will
o.

p. look into all the issues of plagiarism and recommend suitable action to be initiated against the
q. defaulter.

4. RESPONSIBILITIES

Role	Responsibility
Academic Integrity Panel/Exam Branch	Reviewing flagged cases and recommending penalties as per UGC categorization (Level 0 to 3).
Guide/Supervisor	Ensuring originality before submission for plagiarism check.
Library/Exam Branch	Administering plagiarism detection software and issuing similarity reports.

5. PROCEDURE

1. Student/scholar submits document to Library/Exam Branch for similarity check.
2. Similarity report generated and shared with guide and student.
3. If within permissible limit, certified originality report is issued for submission.
4. If exceeding limit, document is referred to Academic Integrity Panel for action as per UGC-prescribed penalty levels.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. Mandatory similarity check for all dissertations, theses, and research publications prior to submission.
b. Constitution of Departmental/Institutional Academic Integrity Panel as per UGC Regulations.
c. Maintenance of similarity report records for a minimum of five years.

7. DOCUMENTATION

Similarity/plagiarism reports; Academic Integrity Panel proceedings; Originality certificates.

8. REVIEW CYCLE

Annually, or upon amendment of UGC Plagiarism Regulations.

9. APPROVAL AUTHORITY

Academic Council.

POLICY 9

Code of Ethics – Staff and Students

Document Code: VMTW/POL/09

1. OBJECTIVE

To establish standards of ethical conduct expected of all staff and students, fostering integrity, respect, and professionalism within the institutional community.

2. SCOPE

Applicable to all teaching, non-teaching staff, and students of VMTW College, on and off campus, in institution-related activities.

3. POLICY STATEMENT

- All members shall conduct themselves with honesty, mutual respect, and adherence to institutional rules, without discrimination on grounds of caste, creed, religion, gender, or disability.
- Maintain decorum both inside and outside the classroom and set a good example to the
- students.
- To be regular and punctual towards their duties.
- Should act with integrity and comply with laws.
- Plagiarism of any nature is prohibited.
- Maintain a professional work environment and comply with institution policies.
- Always conduct professionally. Be kind to others. Do not insult or put down others. Treat others as you would like to be treated. Harassment and exclusionary behaviour aren't acceptable.
- Protect institution assets, including physical, intellectual, and electronic or digital properties.
- The behaviour of the faculty with female students and other employees shall be modest.
- As per the rules of institute, faculties strictly follow the procedure of adjusting their class work. Failing which the leave will be treated as unauthorized and necessary action will be taken up.
- Any breach of the Code of Ethics shall be dealt with through the Institutional Disciplinary/Grievance mechanism.
- Confidentiality of institutional and personal data shall be maintained by all staff and students.

4. RESPONSIBILITIES

Role	Responsibility
Principal	Overall custodian of institutional ethics and discipline.
Discipline/Ethics Committee	Investigating reported violations and recommending action.
All Staff and Students	Adherence to the Code and reporting of observed violations.

5. PROCEDURE

1. Code of Ethics circulated and acknowledged by all staff and students at induction.
2. Violations reported to the Ethics Committee through the Grievance Redressal mechanism.

3. Committee investigates and recommends action to the Principal/Governing Body.
4. Decision communicated to concerned parties with right to appeal.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. Signed acknowledgment of Code of Ethics by all staff and students at joining/admission.
b. Functional Ethics/Discipline Committee.
c. Display of Code of Ethics on notice boards and website.

7. DOCUMENTATION

Signed acknowledgment forms; Ethics Committee proceedings; Disciplinary action records.

8. REVIEW CYCLE

Every two years.

9. APPROVAL AUTHORITY

Governing Body.

POLICY 10

Mentoring Policy

Document Code: VMTW/POL/10

1. OBJECTIVE

To provide structured academic, personal, and career guidance to students through a formal mentor-mentee system, as recommended under AICTE Mandatory Disclosure norms.

• To provide the platform to the students for sharing their problems related to academic and non-academic matters.

• To monitor the academic and personal progress of the students.

• To provide career guidance and assistance to the students to grab the opportunity for their development and growth.

• To identify the slow learners, fast learners Advance learners and the weak students and provide an environment to grow and prosper.

• To provide an opportunity for overall development to all the students.

2. SCOPE

Applicable to all undergraduate and postgraduate students and their assigned faculty mentors.

The role of the faculty as a mentor is one of nurturing and providing support for a student during the transition period in academic, professional as well as personal augmentation. In all departments of the institute, mentoring is a continuous process where faculty mentors serve as a resource who will respond to many questions, trivial or complex, that the student might pose support students in choosing course work that meets their needs and interests; encourage students to actively participate in seminars and laboratory work that are realistic in scope and counsel the students on any other academic, professional, personal growth, etc., for necessary advice/guidance/help.

Each faculty will be mentor of a group of 15 to 20 students. Department faculties will be mentors for the students till their graduation completion.

3. POLICY STATEMENT

1. Every student shall be assigned a faculty mentor at the time of admission, with a mentor handling not more than the AICTE-prescribed number of mentees.
2. Mentors shall track academic progress, attendance, and personal wellbeing of mentees and escalate concerns as needed.
3. Mentoring records shall be maintained confidentially and reviewed periodically by the Department.

4. RESPONSIBILITIES

Role	Responsibility
Faculty Mentor	Regular interaction, record-keeping, and escalation of concerns.
HOD	Mentor allocation and periodic review of mentoring records.
Dean Student Welfare	Institution-level oversight and grievance escalation support.

5. PROCEDURE

1. Mentor allocation at admission, communicated to students and parents.
2. Minimum specified mentor-mentee meetings conducted each semester with documented minutes.
3. Academic/personal concerns escalated to HOD or counsellor as appropriate.
4. Semester-end summary report submitted to the Department.

6. RESPONSIBILTIES OF A MENTOR

• Keeps the records of student's profile in the prescribed format
• Maintains the records of absenteeism, problems/issues.
• Explains to students the academic rules and regulation.
• Acquires the results of each student for CIA - I, CIA - II and SEE of each semester.
• Attendance of each student for all courses is monitor through CMS on monthly basis
• Examines the results of the students and counsel for poor results within a week after the results is published.
• Communicates with parents of students to discuss student's performance, any attendance issues and future plan at least twice in a semester.
• Gives specific guidance to students in selecting elective courses for registration.
• Gives guidance and information to plan for industry internship.
• Ensures to provide study material for advanced courses or advance study
• Gives guidance to students for selecting project topic, project guide, counsel them on back papers and debarred courses.
• Reports unresolved cases of students to HOD and if HOD requires further attention to resolve the issue, the unresolved cases can be brought to the attention of higher authorities.
• Keep connect with student even after their graduation.

7. TYPES OF MENTORING ACTIVITIES DONE TOWARDS STUDENTS

Types of mentoring done are:

a. Academic Growth
b. Professional Guidance
c. Career Advancement
d. Laboratory Specific
e. Employability and all-round development

8. MINIMUM COMPLIANCE REQUIREMENTS

- Mentor-mentee ratio within AICTE-prescribed limits.
- Minimum two documented meetings per semester per mentee.
- Mentoring records maintained in individual student files.

9. DOCUMENTATION

Mentor-mentee allocation list; Meeting minutes Semester summary reports.

10. REVIEW CYCLE

Annually.

11. APPROVAL AUTHORITY

Academic Council, on recommendation of Dean Student Welfare.

POLICY 11

Code of Conduct – Hostellers

Document Code: VMTW/POL/11

1. OBJECTIVE

To ensure a safe, disciplined, and conducive residential environment for hostel students, in compliance with AICTE Anti-Ragging and hostel welfare norms.

2. SCOPE

Applicable to all students residing in College hostels and hostel staff/wardens.

3. POLICY STATEMENT

- Hostel residents shall abide by prescribed timings, discipline norms, and safety regulations at all times.
- Ragging in any form is strictly prohibited and shall attract action under the Anti-Ragging Policy and applicable law.
- Entry of outsiders, overnight guests, and use of prohibited items/substances is strictly regulated/prohibited.

4. RESPONSIBILITIES

Role	Responsibility
Chief Warden	Overall hostel administration and discipline.
Hostel Wardens	Day-to-day supervision, attendance, and incident reporting.
Anti-Ragging Committee	Investigating ragging complaints as per UGC/AICTE regulations.

5. PROCEDURE

1. Hostel rules communicated and undertaking obtained from students/parents at admission.
2. Daily attendance and in/out register maintained by wardens.
3. Violations reported to Chief Warden; serious matters escalated to Anti-Ragging/Disciplinary Committee.
4. Periodic hostel inspection for safety and hygiene compliance.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Signed anti-ragging undertaking from every hosteller and parent.
- CCTV/security arrangements at hostel entry points as per norms.
- Functional Anti-Ragging Committee and Squad as per UGC Regulations 2009.

7. DOCUMENTATION

Hostel admission undertakings; In/out registers; Anti-Ragging Committee records; Inspection reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Principal, on recommendation of Chief Warden; Governing Body for policy amendments.

POLICY 12

Grievance Redressal Policy

Document Code: VMTW/POL/12

1. OBJECTIVE

To provide students, staff, and stakeholders a fair, timely, and confidential mechanism for redressal of grievances, in accordance with the UGC (Grievance Redressal) Regulations, 2023.

2. SCOPE

Applicable to all academic and non-academic grievances raised by students, faculty, and staff of VMTW College.

The Grievances may broadly include the following complaints of the aggrieved students

a. Academic

b. Non-Academic

c. Grievances related to Assessment

d. Grievances related to Victimization

e. Grievances related to Attendance

g. Grievances regarding conduction of examinations

h. Harassment by students or the teachers etc.

i. Harassment of women at workplace

j. Harassment of SC/ST students and faculty

3. POLICY STATEMENT

- The College shall constitute a Grievance Redressal Committee (GRC) with representation as prescribed by UGC, headed by a senior faculty member.
- Grievances shall be resolved within the timeline prescribed by UGC Regulations, ensuring confidentiality and non-victimization of the complainant.
- An online/offline grievance submission mechanism shall be made available to all stakeholders.

4. RESPONSIBILITIES

Role	Responsibility
Grievance Redressal Committee	Receiving, investigating, and resolving grievances impartially.
Principal	Ensuring functioning of GRC and escalation to Governing Body where required.
Complainant	Submitting grievance in good faith with relevant facts.

5. PROCEDURE

1. Grievance submitted online/in writing to the GRC.
2. Acknowledgment issued within 3 working days.

3. Committee investigates, hears both parties, and issues resolution within prescribed timeline (generally within 30 days).
4. Appeal, if any, escalated to Ombudsperson/Governing Body as per UGC provisions.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Functional GRC as per UGC 2023 Regulations with student representation.
- Grievance redressal portal/box accessible on campus and online.
- Resolution within prescribed statutory timelines.

7. HOW TO RAISE THE GRIEVANCE

The stakeholders can raise grievances through the following modes

Through SMS / Call/ Message : call to contact number specified on institute website to register the complaint

Email: Stakeholders may write complaint by using email specified on institute website to register the complaint

Letter: The stakeholders can write a letter to the authorities

Website: The stakeholders may also raise the grievance by downloading the grievance redressal form from the institute portal

7. DOCUMENTATION

Grievance register; GRC proceedings and resolutions; Appeal records.

8. REVIEW CYCLE

Annually, or upon amendment of UGC Grievance Regulations.

9. APPROVAL AUTHORITY

Governing Body.

POLICY 13

Guidelines for Promotion of Faculty under CAS – 2018

Document Code: VMTW/POL/13

1. OBJECTIVE

To implement a transparent Career Advancement Scheme (CAS) for faculty promotion strictly in accordance with UGC Regulations, 2018 (as amended).

2. SCOPE

Applicable to all eligible regular teaching faculty of VMTW College seeking promotion under CAS.

3. POLICY STATEMENT

- Promotion under CAS shall be based on minimum qualifying service, Academic Performance Indicator (API) score, and performance in a duly constituted Selection Committee assessment, as per UGC 2018 norms.
- No faculty member shall be denied timely consideration for CAS promotion for which they are eligible.
- Screening-cum-evaluation and Selection Committee routes shall be applied as prescribed for respective promotion stages.

4. RESPONSIBILITIES

Role	Responsibility
IQAC/CAS Cell	Verifying eligibility and API/PBAS documentation.
Selection Committee	Conducting screening/interaction as per UGC composition norms.
Registrar	Processing recommendations and issuing promotion orders.

5. PROCEDURE

1. Eligible faculty submits CAS application with PBAS proforma on completion of qualifying service.
2. IQAC/CAS Cell verifies documentation and API score computation.
3. Selection Committee constituted as per UGC norms conducts assessment.
4. Recommendation placed before Governing Body; promotion order issued upon approval.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Processing of CAS applications within the academic year of eligibility.
- Selection Committee composition strictly as per UGC 2018 Regulations.
- Maintenance of API/PBAS records for all faculty.

7. DOCUMENTATION

CAS/PBAS application forms; Selection Committee minutes; Promotion orders.

8. REVIEW CYCLE

Annually, or upon UGC CAS amendment.

9. APPROVAL AUTHORITY

Governing Body, based on Selection Committee recommendation.

POLICY 14

Curricular Planning and Implementation Policy

Document Code: VMTW/POL/14

1. OBJECTIVE

To ensure systematic planning, delivery, and monitoring of curriculum in line with University/AICTE Model Curriculum and NEP 2020 outcomes-based education framework.

2. SCOPE

Applicable to all academic departments and programs offered by VMTW College.

3. POLICY STATEMENT

- Curriculum delivery shall be planned through course files, academic calendars, and outcome-based teaching-learning plans prior to commencement of each semester.
- Departments shall ensure curriculum coverage, continuous assessment, and timely feedback-based revision in line with Board of Studies recommendations.
- Flexibility for skill-based/multidisciplinary electives shall be provided as per NEP 2020, where permitted by the affiliating University.

4. RESPONSIBILITIES

Role	Responsibility
Dean Academics/IQAC	Institution-level academic calendar and monitoring.
HOD	Departmental curriculum planning and course allocation.
Course Coordinator/Faculty	Preparation and execution of course files and lesson plans.

5. PROCEDURE

1. Academic calendar prepared and approved before semester start.
2. Course files with lesson plans, CO-PO mapping prepared by faculty.
3. Mid-semester review of curriculum coverage by HOD/IQAC.
4. End-semester feedback compiled for Board of Studies input.

5. 1 CURRICULAR PLANNING

The Curriculum is prepared by the concern Board of Studies (BOS) consisting of experts from the Industry, academia, members of BOS etc. The curriculum is finally approved by the academic council and displayed on institute website. At the beginning of each academic year the academic calendar and guidelines about the dates of commencement of the semester, end of the semester, continuous internal assessment, semester end examinations, Practical examinations, holidays etc will be issued.

Principal receives inputs through Internal Quality Assurance Centre, Department Advisory Board (DAB), council of deans and Academic coordinators etc. Based on these inputs Principal, head of the department (HOD), Dean of Planning, Monitoring and Continuous Education, Dean of Academic, academic committee member coordinators, Dean of Student Affairs, discusses and prepares the institute Event Calendar. These are documented by Monitoring and Continuous Education. It is then distributed to all the departments. Each department prepares their department Event Calendar in

consultation with head of the department. Principal held a common meeting with all teaching and non-teaching staff before commencement of semester. Students are also made aware of commencement of semester through a common notice in bulletin board and also Telegram messenger.

Head of the department is to conduct a meeting with all staff before commencement of semester. The course allotment is done by head of the department and teaching plan - schedule of instruction of each course is prepared in line with department event calendar by individual course faculty .The planning and implementation of curriculum is being monitored through academic cell Academic Monitoring Committee.

5. 2 DEPARTMENT ACADEMIC COORDINATOR (DAC)

The Department Academic Coordinator should monitor:

a. Display of Class time table, timely distribution of individual time table and tabulation of faculty workloads.

b. Students' Attendance monitoring through ERP Portal

c. Syllabus coverage monitoring through ERP Portal

d. Records of sending letters / SMS to the parents regarding their wards' performance.

e. Mentors' records.

f. Record of make-up classes.

g. Display of monthly attendance, defaulter list, CIE test marks etc.

k. To conduct interaction with course faculty (if required) and prepare minutes of meeting.

1. Analyze and follow up various feedback like Turn-I (Early Semester) & Turn II (End of Semester and OBE) through ERP Portal, Course exit survey, student satisfaction survey report etc. related to academics.

m. Executing two internal Academic Audits for each semester. and external audit annually

n. Forwarding information about not reported, late reported faculties to lecture hall / practical if any to HOD / Dean/ Principal for necessary action.

6. MINIMUM COMPLIANCE REQUIREMENTS

- 100% course files with CO-PO-PSO mapping maintained per course.
- Academic calendar circulated within the first week of semester.
- Minimum two curriculum review meetings per semester per department.

7. DOCUMENTATION

Academic calendar; Course files; Board of Studies minutes; Curriculum feedback reports.

8. REVIEW CYCLE

Every academic year, or as per University curriculum revision cycle.

9. APPROVAL AUTHORITY

Academic Council.

POLICY 15

Audit Process Manual

Document Code: VMTW/POL/15

1. OBJECTIVE

1, To ensure systematic financial and academic audit of institutional operations, promoting transparency and statutory compliance as per AICTE/UGC audit norms.

2. To understand the existing system and assess the strengths and weaknesses of the departments and administrative units and to suggest the methods for improvement and for overcoming the weaknesses

3. To identify the bottlenecks in the existing administrative mechanisms, opportunities for academic reforms, administrative reforms and examination reforms etc.

4. To suggest the methods for continuous improvement of quality

2. SCOPE

Applicable to all financial transactions, academic processes, and administrative records of VMTW College subject to internal and statutory audit.

3. POLICY STATEMENT

- The College shall conduct internal audit at least twice annually and statutory/external financial audit as mandated by applicable law and AICTE norms.
- Academic audit of departments shall be conducted by IQAC to verify compliance with curricular, examination, and quality benchmarks.
- Audit observations shall be complied with (ATR – Action Taken Report) within the stipulated timeline.

4. RESPONSIBILITIES

Role	Responsibility
Internal Audit Committee/Finance Officer	Coordinating internal and statutory financial audit.
IQAC	Conducting academic audit of departments.
HODs/Section Heads	Providing records and complying with audit observations.

5. PROCEDURE

1. Annual audit plan approved by Governing Body/Finance Committee.
2. Auditors verify records, conduct physical verification, and issue draft observations.
3. Departments submit compliance/ATR within the prescribed period.
4. Final audit report placed before Governing Body.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. Annual statutory financial audit as per applicable Societies/Trust/Companies Act provisions.

b. Annual internal academic audit of all departments by IQAC.

c. ATR submission within 30 days of receipt of audit report.

7. DOCUMENTATION

Audit plan; Audit reports; Action Taken Reports; Governing Body minutes on audit.

8. REVIEW CYCLE

Annually (Twice).

9. APPROVAL AUTHORITY

Governing Body.

POLICY 16

Industry Institute Interface Policy

Document Code: VMTW/POL/16

1. OBJECTIVE

To strengthen collaboration between the College and industry for curriculum relevance, internships, placements, and applied research, as encouraged by AICTE's Industry Institute Partnership Cell (IIPC) guidelines.

2. SCOPE

Applicable to all departments engaging with industry partners for MoUs, internships, guest lectures, and collaborative projects.

3. POLICY STATEMENT

- The College shall operate an Industry Institute Interface Cell to formalize MoUs, coordinate industry visits, internships, and joint activities.
- Industry inputs shall be incorporated into curriculum design and Board of Studies deliberations wherever feasible.
- All industry collaborations shall be formalized through written MoUs specifying scope, duration, and responsibilities.

4. RESPONSIBILITIES

Role	Responsibility
TPO	Identifying and formalizing industry partnerships.
HODs	Facilitating department-specific industry engagement and internships.
Industry Partners	Providing mentorship, internship, and feedback as per MoU terms.

5. PROCEDURE

1. Identification of potential industry partner and preliminary discussion.
2. MoU drafted and signed by competent authority.
3. Activities (internships, guest lectures, projects) planned and executed under the MoU.
4. Annual review of MoU outcomes and renewal/termination decision.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Minimum number of active industry MoUs per department as fixed by the College.
- At least one industry interaction activity per semester per department.
- MoU renewal/review conducted before expiry.

7. DOCUMENTATION

Signed MoUs; Industry activity reports; Internship placement records.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the Principal/TPO

POLICY 17

Energy Management Policy

Document Code: VMTW/POL/17

1. OBJECTIVE

To promote judicious use of energy resources and adoption of energy-efficient and renewable practices across the campus, supporting AICTE's Green Campus initiative.

2. SCOPE

Applicable to all buildings, laboratories, hostels, and common facilities of VMTW College.

3. POLICY STATEMENT

- The College shall undertake periodic energy audits and implement measures for energy conservation, including LED lighting, efficient, and renewable energy sources such as solar power.
- Energy consumption data shall be monitored and reported to the Green Campus Committee.
- Awareness programs on energy conservation shall be conducted for students and staff.

4. RESPONSIBILITIES

Role	Responsibility
Green Campus/Energy Committee	Conducting audits and monitoring energy usage.
Maintenance Department	Implementation of energy-saving infrastructure.
All Staff and Students	Responsible use of electrical appliances and equipment.

5. PROCEDURE

1. Energy audit conducted at prescribed intervals by qualified auditor.
2. Audit recommendations implemented in phases with budget approval.
3. Monthly energy consumption data recorded and reviewed.
4. Annual energy conservation report submitted to Governing Body.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Energy audit at least once every two years.
- Minimum specified percentage of renewable energy usage as targeted by the College.
- Display of energy-saving practices/signage across campus.

7. DOCUMENTATION

Energy audit reports; Consumption logs; Green Campus Committee minutes.

8. REVIEW CYCLE

Every two years, or upon major infrastructure change.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the Green Campus Committee.

POLICY 18

Waste Management Policy

Document Code: VMTW/POL/18

1. OBJECTIVE

To ensure scientific segregation, disposal, and reduction of waste generated on campus, in line with AICTE Green/Swachh Campus norms and applicable environmental regulations.

2. SCOPE

Applicable to all academic blocks, laboratories, hostels, canteens, and administrative offices of VMTW College.

3. POLICY STATEMENT

- Waste shall be segregated at source into biodegradable, non-biodegradable, e-waste, and hazardous/chemical waste categories.
- Laboratory and chemical waste shall be disposed of through authorized agencies as per Pollution Control Board norms.
- The College shall promote reduction, reuse, and recycling practices, including composting of biodegradable waste where feasible.

4. RESPONSIBILITIES

Role	Responsibility
Waste Management/Green Campus Committee	Policy implementation and monitoring.
Housekeeping Staff	Segregation, collection, and safe disposal of waste.
Lab In-charges	Safe handling and disposal of laboratory/chemical waste.

5. PROCEDURE

1. Color-coded bins provided across campus for waste segregation.
2. Biodegradable waste composted/processed on-site where feasible.
3. E-waste and hazardous waste handed over to authorized recyclers with documentation.
4. Periodic inspection and reporting by the Green Campus Committee.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Segregated waste collection system operational campus-wide.
- Authorized disposal agreements for e-waste/hazardous/biomedical waste.
- Zero open burning of waste on campus.

7. DOCUMENTATION

Waste disposal agreements/manifests; Green Campus Committee inspection reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the Green Campus Committee.

POLICY 19

Scholarship Policy

Document Code: VMTW/POL/19

1. OBJECTIVE

To ensure timely and transparent disbursement of scholarships and financial assistance to eligible students under Government and institutional schemes.

2. SCOPE

Applicable to all students of VMTW College eligible for Government (State/Central) scholarships and institutional financial assistance schemes.

3. POLICY STATEMENT

1. The College shall facilitate timely application, verification, and forwarding of scholarship claims through the applicable Government portal (e.g., National/State Scholarship Portal).
2. Institutional scholarships/fee concessions, where available, shall be granted on merit-cum-means basis through a transparent selection process.
3. No eligible student shall be denied access to scholarship application support on account of administrative delay by the College.

4. RESPONSIBILITIES

Role	Responsibility
Scholarship Cell/Nodal Officer	Coordinating application, verification, and portal submission.
Accounts Section	Reconciliation of scholarship disbursement with fee records.
Students	Timely submission of complete and accurate documentation.

5. PROCEDURE

1. Notification of scholarship schemes and deadlines to all eligible students.
2. Collection and verification of documents by the Scholarship Cell.
3. Online submission/forwarding through the Government portal within deadline.
4. Follow-up and reconciliation of disbursed amounts with student fee accounts.

6. MINIMUM COMPLIANCE REQUIREMENTS

a. 100% forwarding of complete scholarship applications within portal deadlines.

b. Display of scholarship scheme information on notice board/website.

c. Maintenance of scholarship disbursement register.

7. DOCUMENTATION

Scholarship application records; Portal forwarding proofs; Disbursement register.

8. REVIEW CYCLE

Annually, or upon change in Government scholarship guidelines.

9. APPROVAL AUTHORITY

Principal, on recommendation of the Scholarship Cell.

POLICY 20

Student Council Policy

Document Code: VMTW/POL/20

1. OBJECTIVE

To institutionalize student participation in College governance and co-curricular life through a democratically constituted Student Council, as encouraged under AICTE norms.
1. Promote co-curricular activities leading the students to the intellectual, social, cultural and physical development so as to prepare them as ideal citizens.
2. Expand academic and co-curricular interest among the students by maintaining sports complex, library, canteen and other facilities.
3. Facilitate the students and conduct several club activities for overall development of the students.
4. Develop a sense of discipline and commitment as an educated individual towards the society.

2. SCOPE

Applicable to all enrolled students of VMTW College eligible to participate in or elect the Student Council.

3. POLICY STATEMENT

- A Student Council shall be constituted annually through a transparent nomination/election process/Message with representation across years and programs.
- The Council shall function as a liaison between students and administration on academic, cultural, and welfare matters.
- The Council shall operate under the guidance of a faculty Student Council Coordinator.

4. RESPONSIBILITIES

Role	Responsibility
Student Council Coordinator	Facilitating elections and guiding Council activities.
Student Council Office Bearers	Representing student interests and organizing approved activities.
Dean Student Welfare	Institutional oversight and budget facilitation.

5. PROCEDURE

1. Notification of Student Council elections/nominations at the start of the academic year.
2. Election/selection conducted as per eligibility criteria (academic standing, discipline record).
3. Council formally inducted with defined roles and responsibilities.
4. Periodic meetings with Principal/Dean Student Welfare to discuss student matters.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Student Council constituted within the first two months of the academic year.
- Minimum one Council-Administration meeting per semester.
- Representation from each year/program in the Council.

7. DOCUMENTATION

Election/nomination records; Council meeting minutes; Activity reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Principal, on recommendation of Dean Student Welfare

POLICY 21

Internship Policy

Document Code: VMTW/POL/21

1. OBJECTIVE

To ensure structured, credit-linked industry/practical exposure for students through internships, in compliance with the AICTE Internship Policy, 2019.

• Exposure to the industrial environment, which cannot be simulated in the classroom and hence creating competent professionals for the industry.

• Provide possible opportunities to learn understand and sharpen the real time technical / managerial skills required at the job.

• Exposure to the current technological developments relevant to the subject area of training.

• Create conducive conditions with quest for knowledge and its applicability on the job.

2. SCOPE

Applicable to all undergraduate and postgraduate students undertaking mandatory or voluntary internships as part of their curriculum.

Internships options available to Students:

In-house Internships:

External Internships / Field Trip

3. POLICY STATEMENT

- Every student shall undergo internship(s) of the duration and credit weightage prescribed by the applicable University/AICTE curriculum.
- Internships shall be facilitated through the Training and Placement Cell in coordination with industry partners, and may include summer, winter, or semester-long internships.
- Internship performance shall be evaluated through a structured assessment involving the industry mentor and faculty coordinator.

4. RESPONSIBILITIES

Role	Responsibility
Training and Placement Officer (TPO)	Sourcing internship opportunities and coordinating placements.
Faculty Internship Coordinator	Monitoring student progress and evaluating reports.
Students	Timely completion, reporting, and adherence to organizational discipline during internship.

5. PROCEDURE

1. Internship opportunities identified and communicated to students via TPO/department.
2. Students register for internship with details of host organization.

3. Periodic monitoring through logbook/reports during the internship period.
4. Final internship report and certificate submitted for evaluation and credit award.

6. MINIMUM COMPLIANCE REQUIREMENTS

- 100% internship completion by eligible students as per curriculum requirement.
- Signed internship agreement/MoU with host organization where applicable.
- Submission of internship completion certificate and evaluated report.

7. DOCUMENTATION

Internship registration records; Logbooks/reports; Completion certificates; Evaluation sheets.

8. REVIEW CYCLE

Annually, or upon AICTE Internship Policy amendment.

9. APPROVAL AUTHORITY

Academic Council, on recommendation of the TPO/Dean Academics.

POLICY 22

Examination Rules and Procedures

Document Code: VMTW/POL/22

1. OBJECTIVE

To ensure fair, transparent, and secure conduct of internal and University examinations in accordance with University/UGC examination norms.

2. SCOPE

Applicable to all internal assessments, semester-end examinations, and practical/viva examinations conducted at VMTW College.

3. POLICY STATEMENT

- Examinations shall be conducted strictly as per the academic calendar, with confidentiality of question papers and integrity of evaluation maintained at all stages.
- Malpractice during examinations shall attract disciplinary action as per University/College examination rules.
- Students shall be permitted to appear for examinations only upon satisfying prescribed attendance and academic eligibility criteria.

4. RESPONSIBILITIES

Role	Responsibility
Controller of Examinations/Exam Cell	Overall planning, conduct, and result processing of examinations.
Squad/Invigilators	Ensuring fair conduct and reporting malpractice.
HODs	Verifying student eligibility and coordinating internal assessments.

5. PROCEDURE

1. Examination schedule notified as per academic calendar.
2. Eligibility list verified and hall tickets issued.
3. Examinations conducted with designated invigilators and squad checks.
4. Answer scripts evaluated, moderated, and results processed as per University guidelines.
5. Malpractice cases referred to the Unfair Means Committee for action.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Minimum attendance eligibility (as per University norms, typically 75%) verified before hall ticket issuance.
- Secure custody and confidentiality of question papers and answer scripts.
- Functional Unfair Means/Malpractice Committee.

7. DOCUMENTATION

Examination schedule; Eligibility and hall ticket records; Answer script custody register; Unfair Means Committee proceedings.

8. REVIEW CYCLE

Annually, or upon University examination reform.

9. APPROVAL AUTHORITY

Academic Council/Controller of Examinations, as per University-delegated authority.

POLICY 23

Guidelines for Conducting Seminars, Expert Lectures, Workshops, Faculty Development Programs, and Guest Lectures

Document Code: VMTW/POL/23

1. OBJECTIVE

To ensure structured planning, quality, and documentation of seminars, workshops, FDPs, and guest lectures organized by the College, in line with AICTE Faculty Development norms.

2. SCOPE

Applicable to all departments and cells organizing academic/professional development events at VMTW College.

OUTCOMES

The major outcomes of these programs as below

1. Real life world exposure
2. Inspiration for students
3. Up gradation of skills for both students and faculty
4. Career guidance for students

3. POLICY STATEMENT

- Each department shall plan a minimum number of seminars, expert lectures, workshops, and FDPs each academic year as part of the institutional academic calendar.
- All such events shall be approved in advance by the Principal/IQAC and documented with attendance, feedback, and outcome reports.
- Resource persons shall be selected based on relevant expertise, with due approval of honorarium/expenses as per institutional norms.

4. RESPONSIBILITIES

Role	Responsibility
Organizing Department/Coordinator	Planning, execution, and reporting of the event.
IQAC	Approval, quality monitoring, and consolidation of institutional records.
Principal	Final approval and resource sanction.

5. PROCEDURE

1. Proposal submitted by department with objective, resource person details, and budget.
2. Approval obtained from IQAC/Principal at least two weeks prior to the event.
3. Event conducted with attendance and feedback forms administered.
4. Report with photographs, feedback analysis, and outcomes submitted to IQAC within one week of the event.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Minimum number of FDPs/seminars/workshops per department per year as fixed by IQAC.
- Prior written approval for every event.
- Post-event report submission within stipulated timeline.

7. DOCUMENTATION

Event proposal and approval; Attendance sheets; Feedback forms; Post-event reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Principal, on recommendation of IQAC.

POLICY 24

Implementation Procedure for Conducting Final Year Project Work

Document Code: VMTW/POL/24

1. OBJECTIVE

To ensure systematic planning, execution, and evaluation of final year project work, aligned with AICTE curriculum norms and outcome-based education requirements.

2. SCOPE

Applicable to all final year undergraduate/postgraduate students undertaking major project work as part of their curriculum.

3. POLICY STATEMENT

- Project topics shall be approved by a Departmental Project Committee, ensuring relevance, originality, and appropriate scope.
- Each project group shall be assigned a faculty guide responsible for periodic monitoring and mentoring.
- Project evaluation shall include continuous assessment, mid-term review, and final viva-voce/demonstration as per curriculum requirements.

4. RESPONSIBILITIES

Role	Responsibility
Project Coordinator/Committee	Topic approval, guide allocation, and schedule management.
Faculty Guide	Regular mentoring and progress monitoring of assigned project groups.
Students	Timely execution, documentation, and originality of project work.

5. PROCEDURE

1. Project topic proposal submitted and reviewed by the Project Committee.
2. Guide allocation and project registration completed within the notified timeline.
3. Periodic review presentations (minimum two) conducted during the semester.
4. Final project report, plagiarism check, and viva-voce/demonstration conducted as per University norms.
5. Grades/marks submitted through the Examination Cell.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Plagiarism/similarity check mandatory for all final project reports.
- Minimum two review presentations per project with documented evaluation.
- Project report format compliant with University guidelines.

7. DOCUMENTATION

Project registration records; Review evaluation sheets; Plagiarism reports; Final project reports.

8. REVIEW CYCLE

Annually, or upon curriculum revision.

9. APPROVAL AUTHORITY

Academic Council, on recommendation of the Project Coordinator/HOD.

POLICY 25

E-Mail Management Policy

Document Code: VMTW/POL/25

1. OBJECTIVE

To govern the responsible, secure, and professional use of institutional e-mail systems by staff and students, ensuring data security and appropriate conduct.

2. SCOPE

Applicable to all official e-mail accounts issued by VMTW College to staff, faculty, and students.

3. POLICY STATEMENT

- Institutional e-mail accounts shall be used primarily for official academic and administrative communication.
- Users shall not transmit confidential institutional data, offensive content, or unauthorized bulk communication through institutional e-mail.
- The IT Cell shall ensure adequate security measures including spam filtering, backup, and access control for institutional e-mail systems.

4. RESPONSIBILITIES

Role	Responsibility
IT Cell/System Administrator	Account provisioning, security, and technical support.
All Staff and Students	Responsible and professional use of institutional e-mail.
HODs/Section Heads	Ensuring official communication is routed through institutional e-mail.

5. PROCEDURE

1. E-mail accounts created upon admission/joining with unique institutional ID.
2. Users acknowledge acceptable use terms upon account activation.
3. IT Cell monitors for security threats and maintains periodic backups.
4. Accounts deactivated/archived upon relieving or completion of course, as per data retention norms.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Official e-mail account issued to every staff member and student.
- Acceptable Use Policy acknowledgment on account creation.
- Periodic password policy enforcement and security audit.

7. DOCUMENTATION

E-mail account register; Acceptable Use Policy acknowledgments; IT security audit records.

8. REVIEW CYCLE

Every two years, or upon major IT policy change.

9. APPROVAL AUTHORITY

Principal, on recommendation of the IT Cell.

POLICY 26

Green Campus Policy

Document Code: VMTW/POL/26

1. OBJECTIVE

To promote environmentally sustainable practices across the campus, integrating green initiatives into infrastructure, operations, and academic life, in line with AICTE's Green Campus initiative.

2. SCOPE

Applicable to all buildings, grounds, laboratories, and operational activities of VMTW College.

3. POLICY STATEMENT

- The College shall promote green infrastructure including rainwater harvesting, tree plantation, plastic-free campus initiatives, and sustainable transport practices.
- Green Campus initiatives shall be integrated with the Energy Management and Waste Management Policies for holistic environmental stewardship.
- Environmental awareness activities shall be conducted regularly for students and staff.

4. RESPONSIBILITIES

Role	Responsibility
Green Campus Committee	Planning, implementing, and monitoring green initiatives.
Estate/Maintenance Department	Upkeep of green infrastructure and facilities.
All Stakeholders	Participation in green campus practices and awareness drives.

5. PROCEDURE

1. Annual Green Campus action plan prepared and approved.
2. Implementation of identified initiatives (plantation drives, rainwater harvesting, plastic-free zones) as per plan.
3. Periodic monitoring and green audit of campus practices.
4. Annual sustainability report submitted to Governing Body/IQAC.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Annual green audit of the campus.
- Rainwater harvesting structures functional at designated points.
- Ban on single-use plastic within campus premises.

7. DOCUMENTATION

Green Campus action plan; Green audit reports; Sustainability reports.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the Green Campus Committee.

POLICY 27

VMTW – Sustainable Development Goals (SDG) Policy

Document Code: VMTW/POL/27

1. OBJECTIVE

To align institutional planning, academics, and operations with the United Nations Sustainable Development Goals (SDGs), integrating sustainability into the College's mission consistent with AICTE and NEP 2020 directions.

2. SCOPE

Applicable to all academic, research, administrative, and outreach activities of VMTW College.

3. POLICY STATEMENT

- The College shall map its ongoing and planned activities to relevant SDGs (e.g., Quality Education, Gender Equality, Clean Energy, Climate Action) and monitor progress through an institutional SDG framework.
- Curriculum, research, and extension activities shall be encouraged to incorporate SDG-linked themes and outcomes.
- The College shall report SDG-aligned achievements as part of its annual and accreditation reporting.

4. RESPONSIBILITIES

Role	Responsibility
SDG/Sustainability Cell	Coordinating SDG mapping, monitoring, and reporting.
IQAC	Integrating SDG indicators into institutional quality assurance processes.
Departments	Incorporating SDG-linked activities in academics, research, and extension work.

5. PROCEDURE

1. Institutional SDG Cell constituted with mapping of ongoing initiatives to relevant SDG targets.
2. Departments identify SDG-aligned academic/extension activities each year.
3. Periodic monitoring of SDG-linked outcomes by the SDG Cell/IQAC.
4. Annual SDG progress report compiled and submitted to Governing Body.

6. MINIMUM COMPLIANCE REQUIREMENTS

- Institutional SDG action plan mapped to at least the priority SDGs identified by the College.
- Annual SDG progress reporting.
- At least one SDG-linked extension/awareness activity per department per year.

7. DOCUMENTATION

SDG action plan and mapping document; Annual SDG progress reports; Department-wise SDG activity records.

8. REVIEW CYCLE

Annually.

9. APPROVAL AUTHORITY

Governing Body, on recommendation of the SDG/Sustainability Cell and IQAC.

POLICY 28

VMTW – Vignan's Maintenance & Safety Policy

Document Code: VMTW/POL/28

INTRODUCTION

The Maintenance and Safety Policy of Vignan's Institute of Management & Technology for Women (VMTW) provide a comprehensive framework for the systematic maintenance of infrastructure and the implementation of safety measures across all academic and administrative areas, including laboratories of all kinds. The Standard Operating Procedure should follow in Maintenance of Infrastructure related to Academics and administrative areas in the Institution. It also provides guidelines to follow to administer these policies.

VMTW will keep all Maintenance policies current and relevant. Therefore, from time to time it will be necessary to modify and amend some sections of the policies and procedures, or to add new procedures.

MAINTENANCE POLICY GOALS

The inclusion of the following goals should help a Facility to formulate a successful operation and maintenance of institute program:

1. Perform maintenance on a periodic basis.
2. Provide functional facilities that (a) meet the VMTW requirements; (b) have an environmentally acceptable atmosphere for students, faculty, and staff; and (c) ensure the health and safety of all personnel.
3. Identify potential problems early within the context of the preventive maintenance system so that corrective action will be planned, included in the budget cycle, and completed in a timely manner.
4. Follow an orderly program so that administrative costs are minimized and the workload for personnel is maintained at a relatively constant level.
5. Conserve energy and resources by ensuring maximum operating efficiency of energy- consuming equipment and systems.
6. Maintain credible relations with users by providing well-maintained facilities and information on preventive maintenance activities.
7. Identify and implement possible improvements that will reduce costs, improve service, and result in more efficient operation.

Any suggestions, recommendations or feedback on the policies and procedures specified in this manual are welcome and will be incorporated in next revision of after thorough review by stakeholders.

In order to provide a safe, healthy, and secure environment, the VMTW requires the use of two types of maintenance: preventive and breakdown.

1. Preventive Maintenance Policy
2. Breakdown Maintenance Policy

Preventive Maintenance Policy

Preventive maintenance is a maintenance that is regularly performed on a piece of equipment that provides periodic inspection, adjustment, minor repair, lubrication, reporting, and data recording necessary to minimize building equipment and utility system breakdown and maximize system and equipment efficiency. It is performed while the equipment is still working so that it does not break down unexpectedly. Preventive maintenance will be provided by In-house staff only for most of the time. VMTW takes the help of outsourcing for the equipment like elevators & Air Conditioners etc. which are under annual maintenance. Preventive maintenance requires Classrooms, Conference Halls, Laboratories, Center of Excellence, Library, and Computers etc.

Purpose of the Policy

This policy provides guidelines for the maintenance of physical, academic and support facilities of the college to ensure that not to break down unexpectedly. Preventive Maintenance Program procedures are designed to fulfill the needs of the Facility. The purpose of the program is to produce cost savings by:

1. Reducing the downtime of critical systems and equipment.
2. Extending the life of facilities and equipment.
3. Improving equipment reliability.
4. Ensuring proper equipment operation.
5. Improving the overall appearance of facilities.

Procedures

Maintenance of Classrooms.

Classrooms with furniture and teaching aids are maintained by the respective department staff and attendants and supervised by the respective Head of the Department. The Heads of Departments report to the administration periodically on all the maintenance work. Students optimally utilize all classrooms during the daylong working hours and are also mentored to upkeep the furniture. The following services are in work force for upkeeping of classrooms.

Service	Frequency	Responsible Staff
Cleaning of Classrooms.	Daily	Attenders
Floors dust mop, wet mop, High and low dusting.		Attenders
Emptying waste baskets.		Attenders
Removing obsolete circulars from Notice Boards.		Attenders
Working condition of computer system, projectors and projector screen.		Technician

Maintenance of Laboratories

The respective faculty members, staff, lab assistants and other service personnel are given responsibility to maintain the equipment's under their purview. Stock registers and logbooks are maintained by the respective laboratories to report entries and defects arising for rectification. All major repairs are identified and external expertise sought for maintenance of equipment wherever necessary.

Standard operating procedures for all high-end equipment's are made available to the users. In-campus users register in the logbooks and are responsible for the safe handling of the equipment. Breakage and repair, if any, are reported to the Head of Department or the faculty-in charge and suitable measures are taken for speedy functioning of the equipment. Breakage of glassware intended for use by students and entered in the breakage register and charges levied based on the cost of the equipment payable by the students at the end of the year.

The condemned/obsolete items are discarded by procedure and the same is entered into the stock register. Annual maintenance is sustained for maintenance of high-end equipment's and high-end servers and computers.

The following services are in work force for upkeeping of Laboratories and Center of Excellence.

Service	Frequency	Responsible Staff
Cleaning of Laboratories.	Daily	Attenders
Floors dust mop, wet mop, High and low dusting.		Attenders
Emptying wastebaskets.		Attenders
Working condition of equipment in laboratory/CoE.		Lab Programmer

Maintenance of Conference Hall & Seminar Halls.

Seminar halls are under the control of all departments. Cleanliness is taken care of by the maintenance staff. Effective utilization of conference hall and seminar halls for organizing academic meetings, seminars, conferences, and cultural events is made. The following services are in work force for upkeeping of Conference halls and Seminar Halls.

Service	Frequency	Responsible Staff
Cleaning of Conference Halls and Seminar Halls	Daily	Attenders
Floors dust mop, wet mop, High and low dusting		Attenders
Emptying wastebaskets		Attenders
Working condition of Computer system, projector and projector screen.		Technician

Maintenance and Utilization of Library and Library Resources

The library staff are clearly instructed in the care and handling of library documents, particularly during processing, shelving and conveyance of documents. The following steps need to be taken:

- Bound volumes are not to be sorted out from their fore edges, as this process weakens the binding.
- Shelves should not be fully packed. A too-full shelf can crack spines and cause damage when a reader tries to remove a volume. Huge volumes need to be kept flat.
- Dust should not be allowed to deposit on the documents because the collection of dust causes staining of documents and promote chemical and biological problems. Cleaning and using vacuum should be done regularly and carefully.
- Magnetic discs or documents containing disc(s) should not be kept open or near any magnetic or electric equipment, i.e. tape recorders, air-conditioners, etc. Such materials should be kept in a dust-free, temperature and humidity-controlled room.
- Proper pest management is done to minimize the problems caused by insects. Borax or common salt is used to prevent cockroaches. Sodium fluoride is applied to bound volumes to save them from silverfish. Spread of kerosene oil, DDT or gammaxene powder over the affected area can help in removal of termites or white ants. Proper cleaning, fumigation and exposure to sunlight to the documents are done to reduce the

effect of insects in the library. Repellants are used to save materials from Rats.

The following services are in work force for maintenance of library and library resources.

Service	Frequency	Responsible Staff
Book Binding	Once in a Semester	Asst. Librarian
Taking of Pest control measures		Asst. Librarian
Old Volumes maintenance	Once in a Year	Asst. Librarian
Cleaning of Tables, Chairs and Bookshelves.	Daily	House Keeping
Floors dust mop, wet mop, High and low dusting		Attenders

Maintenance of Hardware

The Hardware support staff maintain the ICT facilities, including computers and servers. The maintenance includes the required software installation, antivirus upgradation. Hardware maintenance constitutes a critical component of the institutional maintenance framework and is essential to ensure the continuous, reliable, and secure functioning of all computing and electronic infrastructure. This includes desktops, servers, printers, scanners, networking devices, UPS systems and other peripherals installed across classrooms, laboratories, library facilities, administrative offices and Center of Excellence.

Comprehensive records of hardware assets are maintained, including procurement details, installation dates, warranty status, repair history and disposal records. Obsolete or irreparable equipment is condemned and disposed of in accordance with established institutional procedures, with appropriate entries made in the stock register. Campus Wi-Fi is maintained by respective technical staff. The following services are in work force for upkeeping of computers.

Service	Frequency	Responsible Staff
Software Installation	Weekly	Respective Staff
Hardware Repairs		Respective Staff
Computer Peripherals		Respective Staff

Maintenance of Housekeeping

Cleaning of the campus areas, including the academic and administrative buildings, is performed

daily in the morning before the regular classes begin with the help of the outsourced housekeeping team. Toilets are cleaned thrice every day. The whole campus area is maintained by the housekeeping supervisor who will be reporting the completion of work to the Administrative Office.

Service	Frequency	Responsible Staff
Offices		
Cleaning of office rooms and furniture	Daily	House Keeping
Floors dust mop, wet mop, High and low dusting		House Keeping
Emptying Waste Baskets		House Keeping
Staircases and Corridors		
Cleaning of steps and floor	Daily	House Keeping
Wet mop		House Keeping
Rest Rooms		
Cleaning of Toilets	Thrice in a Day	House Keeping
Disinfecting all Washbasins and restrooms		House Keeping
Wet mob, High and low dusting		House Keeping
Emptying Waste Baskets	Daily	House Keeping

Breakdown Maintenance Policy

The breakdown maintenance is a type of maintenance that involves using a machine until it completely breaks down and then repairing it to working order. Breakdown maintenance of any asset, facility and equipment under preventive maintenance is urgent requirement where the institute works in mission-mode. Breakdown maintenance will be taken care of by In-house staff only. If requires VMTW helps outsourcing.

All breakdown maintenance activities are classified into following three categories.

- Building maintenance
- Electrical maintenance
- Computer maintenance

Purpose of the Policy

This policy provides guidelines for the maintenance of various facilities of the VMTW to ensure that they are in working condition.

Procedures

Building Maintenance

Concerned personnel should be appointed to look after building maintenance activities such as plumbing, sanitation, and painting works etc. The following is the procedure for resolving the building maintenance

. Step 1: Respective department logs the complaint.

Step 2: Administrative Officer receives complaints from various departments.

Step 3: He initiates actions to solve the problem with his supporting staff and technical staff such as plumbers, carpenters etc.

Step 4: He updates the status after completion of the service request.

Electrical Maintenance

Concerned personnel should be appointed to look after electrical maintenance activities such as repair works of all electrical equipment like fans, lights, intercoms, MCBs, UPS and exhaust fans etc. The following is the procedure for resolving the electrical maintenance.

Step1: Respective department logs the complaint.

Step2: Electrical Maintenance Engineer receives complaints from various departments.

Step3: He initiates actions to solve the problem with his supporting staff and technical staff such as electricians etc.

Step4: He updates after completion of the service request.

Computer Maintenance

Concerned personnel should be appointed to look after computer maintenance activities such as software updates, hardware repairs, antivirus installations, and network issues etc. The following is the procedure for resolving the computer maintenance.

Step1: Respective department logs the complaint.

Step2: Network Administrator receives complaints from various departments.

Step3: He initiates actions to solve the problem with his supporting staff and technical staff such as hardware technicians etc.

Step4: He updates after completion of the service request.

Safety Policy Guidelines

I. General Safety

1. You must understand what you are doing. You are not required to do anything you feel is unsafe or feel unsure about.

a. Seek information or advice where necessary before carrying out new or unfamiliar work.
b. Do not use any apparatus you have not been trained on.

2. No one is allowed to work alone in the lab If anyone wants to work outside of the usual lab timing i.e. from 8:30 am to 7 pm, She needs special permission from the HOD.
3. No food and drink items are allowed in the laboratory. Consumption of food and drinks inside the lab is strictly prohibited.
4. Keep your working place clean.
5. Maintaining a lab notebook is essential.
6. If you are issued with any item (Chemicals, Equipment, Instruments etc..), you are to make an entry in the borrowing register.
7. Turn off all equipment unless instructed when not in use.
8. If you notice that a common lab supply is running low, please let the person concerned know about it.
9. Never work with broken glassware.
10. If you find any equipment is not working, please report it to the person concerned.
11. Respect other experiments, never remove or change parts from others or own experiments.
12. Do not leave an experiment unattended at any time.
13. If you are having problems with an experiment or something unexpected is happening, shut down the experiment.
14. Abiding, all the rules and regulations are essential and mandatory.

II. Personal Safety

1. Ensure proper use of all safety devices (Goggles, Earplugs etc.) and other personal protective equipment (Gloves, Lab Coats etc.)
2. Appropriate protective clothing and footwear MUST be always worn, and long hair must be tied back.
3. All lifting equipment, including chain blocks, pendant hoist controls, and abbey lifting frames are to be used by technical staff unless training and authorization has been

approved.

4. Cleaning your hands before and after the experiments is important.

III. Fire Safety

1. Everyone must undergo firefighting training which is organized by the Institute.
2. Knowing of locations of Fire alarms and Fire-extinguishers are mandatory.
3. Everyone must be aware of Fire exits and Assembly points of the lab.
4. During the fire accidents, keep calm and don't use the elevator, approach the assembly point without fail.

IV. Gas Safety

1. Pressurized cylinders must be latched all the time.
2. Trolley must be used all time to transport any pressurized cylinders.
3. All gas cylinders must be labelled with its content.
4. All gas Cylinders must have a safety cap.
5. Empty cylinders must also be labelled properly.

V. Waste Disposal

1. Designing an experiment MUST include the Waste disposal methods.
2. Waste MUST be segregated and labelled properly according to the Institute norms.
3. Regular disposal of the waste must be carried out.
4. Keep in mind **RECYCLE AND REUSE.**
5. Complying with safety instructions is compulsory.
6. Clean machines after use.
7. Take care when using Compressed Air.

Laboratory Specific Safety Guidelines

Chemistry Laboratories:

1. Always wear gloves and safety goggles inside the chemistry lab.
2. Keep the sinks, and eyewashes free of glassware, etc. Eyewashes should be checked every fortnight, and safety showers should be checked every month. A regular maintenance of eyewash and safety shower should be carried out and documented.
3. Make sure samples are capped tightly and labelled properly. Without a label, all your sample does not make any sense.
4. Never wear gloves outside of the lab and don't touch the door handle wearing a glove.
5. When you order new chemicals/consumables, please tell the group leader or in charge to update the chemical inventories.
6. Always close and latch freezer doors ($-20^{o}C$) completely when not in use.

7. Always close the sash of the chemical fume hood when you are not working inside it.
8. When the chemical hood is not working, no one is allowed to work in the lab.
9. Please check the label before you open a new chemical to ensure proper storage and disposal methods. IF YOU HAVE DOUBTS, PLEASE ASK.
10. To set up a higher scale reaction (more than 1 gram), you need permission from your HOD.
11. Heating reaction in the nighttime is not allowed without the safety heating equipment.
12. Any liquids more than 1 lit should not transfer by holding it with your hands. It must be transferred inside a bucket.
13. Flammable liquids more than 1 lit should not be kept on the working bench overnight. It should be returned to the designated cabinet.
15. Please don't take out the exact maximum amount of reagent/solvent using a syringe,
16. Don't throw anything inside the sink. IF YOU DON'T KNOW THE WASTE DISPOSAL PROCEDURE THEN ASK SOMEONE.
17. Silica gel should always be transferred inside the fume hood and use protecting mask to prevent inhalation.
18. If you spill a small amount (less than 1 gm/ml) of chemical, please clean it immediately. If you spill more then please consult with authorized personnel.
19. Before using any toxic/flammable gas you should inform all your colleagues in the lab.
20. All MSDS datasheets should be available electronically.

Electrical Laboratories

1. Always keep the workbench clean and clear.
2. No conducting parts should lie near any live electrical connections.
3. Turn off all the electrical connections and disconnect the plug points from the socket before leaving the lab.
4. Use electrical cords which are in good condition and if necessary. Connecting multiple cords to the same socket is NOT ALLOWED.
5. All electrical equipment should have 3 wire grounding plugs
6. Plugs must operate with any electrical equipment. DON'T connect bare conductors to any electrical sockets.
7. For equipment with a power rating more than 1 kW always use 15 A sockets
8. Energizing electrical circuits should be carried out under the supervision of the Lab faculty.
21. When using circuits with energy storage elements (inductors and capacitors) make sure that these elements are completely discharged before the disconnection.

22. Live circuits should not be TOUCHED at any point in time.
23. Inspection of MCBs and Fuses is mandatory once a year to ensure their proper working condition.
24. Once a year, a comprehensive survey must be conducted to check for any loose socketing, conductor skinning and faults in electrical connections.
25. The grounding resistance must be measured once in a year and made sure it is less than 5Ω (as recommended by the IEEE).
26. DO NOT install the electrical equipment in any areas where flammable gases, dust, and easily ignitable materials are present.
27. Any hanging jewelry SHOULD BE completely avoided while performing experiments in electrical labs.
28. All electrical installations should be carried out as per the NATIONAL ELECTRICAL SAFETY CODE.
29. Lab managers of all electrical labs SHOULD display the code of conduct to perform the experiments and SHOULD clearly state any special requirements to their lab.
30. Care should be taken to avoid the direct short-circuit while performing any electrical hardware experiments.
31. Any kind of inappropriate electrical connections/leakages/mishandling of electrical equipment/violation of code of conduct SHOULD be brought into the notice of the LSC Committee.
32. Labs SHOULD BE maintained clean to prevent the insects/reptiles to come in contact with the live conductors leading to the short circuit.
33. All equipment used in the electrical lab SHOULD have passed the specified standards and certified.

Mechanical Laboratories

1. Ask Workshop Supervisor before operating the equipment.
2. The amount of compressed gas in a bottle is determined by reading the pressure in the regulator. Each cylinder should be tagged.
3. Storage of compressed gas cylinders must be done carefully by completely closing the valve.
4. All cylinders must be chained in position even during use.
5. Close bottles during non-use. Regulator and lines must be depressurized.
6. When using compressed gas, first ensure that appropriate regulators and pressure gauges compatible with the gas are used. Especially, do not use an oiled gage for oxygen.
7. Once proper regulator is chosen, screw in the regulator threads into the female port on the gas bottle. There should be no resistance until it is almost completely on and then tightening with an adjustable wrench.

8. Remember the right-hand screw rule!
9. Make sure you are using appropriate material, and components are for the expected pressure range.
10. When opening the cylinder, open the valve slightly and then proceed to open gradually.
11. Initially open regulator to a low pressure and check the downstream components for leaks. If no leaks are found, then open the regulator until you reach the desired pressure and check one last time for leaks.
12. When shutting down, close the cylinder and allow gas to bleed out of the line fully before closing regulator.

Physics Laboratories

1. Most instruments in the physics laboratories use an electrical power supply, and some instruments also use the high-voltage power supply, and therefore, general guidelines of electrical safety should be followed.
2. Before switching on any power supply make sure that proper electrical connections to the devices are in place.
3. Before entering any optics laboratory, a user must make sure that they are not disturbing any ongoing experiments. Generally, optical experiments are performed in a dark-room, and therefore any unauthorized entry/sudden switching on of light would disturb/completely ruin the ongoing experiments.
4. Lasers are common light sources that are used in physics laboratories. The laboratory in charge must make sure the laser sign is attached to the laboratory main door. It is also advised to furnish the classes (power rating) of lasers used in in the laboratory.
5. Low-power lasers (Class 2 and Class 3A) include laser pointers and alignment lasers; they are safe when used as intended but require some controls.
6. High-power lasers (Class 3B and Class 4) are more frequently used in research laboratory and the primary hazard associated with these lasers' operation is potential eye damage; other potential hazards include skin burns, electrical currents, explosions, fires, toxic material, laser-generated air contaminants, collateral radiation, noise, and ultraviolet light (in case of UV laser).
7. International regulations strongly advised that the doors of the laboratories with higher-class lasers should be assembled with interlocked devices. Suddenly entering the lab would shut down the laser and hence the ongoing experiments.
8. Only the users, who have gone through a proper laser safety tutorials/class and have signed the laser safety form, can work independently in the lab.

KONDAPUR (V), GHATKESAR (M), MEDCHAL - MALKAJGIRI (D) - 501301
PHONE: +91 96529 10002/3/4,
email: info@vmtw.in, website: www.vmtw.edu.in