

NATIONAL ASSESSMENT AND ACCREDITATION COUNCIL

An Autonomous Institution of the University Grants Commission P.O. Box No. 1075, Nagarbhavi, Bengaluru - 560 072, INDIA

DECLARATION TO BE MADE BY THE INSTITUTION*

Code of Conduct and Ethical Standards

- The institution or its management or any of its other representatives, should not offer any gifts (in kind or any other form), to any of the Peer Team members or their representatives, before, during or soon after the Assessment and Accreditation visit to the institution.
- No hospitality should be provided to the family members of any of the Peer Team Members, during
- Paid consultancy/job/ assignment should not be offered to any Peer Team Member for a period of One year after the declaration of the accreditation status of the institution, by the NAAC.
- No pressure of any kind should be brought directly or indirectly on the members of the Peer Team, in regard to the outcome of the Assessment and Accreditation.
- Any violation of the Code of Conduct and Ethical Standards will result in withdrawal of the

Declaration by the Head of the Institution

| | of the institution |
|--------------------------------------|---|
| I Dr. A. K. Tikhe | as the Head of the |
| institution K. Z. S. Science College | as the Head of the institution, certify that our Brombanhas strictly adhered to the above |
| | |
| 24.10.2024 to 25.10.2 | 024 |
| | |

Signature of the Head of the Institution with official seal Name of the Head of the Institution:

KZS Science College Dr. ABramhani, Kalmoshwar, Dist. Nagpur.

Place: Kalmeshwar

Date:

23.10.2024

*To be submitted soon after the Peer Team Visit.



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No Conflict of Interest Statement* By the Institution

| Name of the Institution | : K.Z.S. SCIENCE COLLEGE, BRAMA |
|---|---|
| Postal Address of the Institution | : Dhapecoada Road, |
| | Kalmeshwar Dist Nappur |
| | PIN 441501 |
| Peer Team Visit Dates | : 24.10.2024 to 25.10.2024 |
| Cycle (1/2/3/4) | : _3 |
| This is to certify that, the Peer Team indirectly through their close relative any official body, or a consultant or ev | n members have no involvement with our institution, directly or es, in the past or at present, as either an employee or a member of ven a graduate. |
| | roposed team will be appointed atleast for a year for any important |
| To, | Seal Principal Name & Signature of the Head of the Institution, Dist. Nagpur. |
| Name of the NAAC Co-ordinating Of | fficer: Dr. B.S. Ponmudiraj |
| Advisor Na. | |

Region

NAAC, Bengaluru-560 072 Fax: 080-23210270

Advisor

*No Conflict of Interest Statement needs to be submitted to NAAC immediately.



Re-accredited B Grade by NAAC

Dr. Bhabha Vidnyan Lokshikshan Sanstha's

K. Z. S. SCIENCE COLLEGE, BRAMHANI

Tah. Kalmeshwar Distt. Nagpur Pin 441 501

Website – www.kzssccllege.edu.in

E-Mail ID: principal kzs@rediffmail.com



Self-declaration / Undertaking by the HEIs

I the undersigned DR. A. K. TIKHE_is willing to undertake the Peer Team Visit to our K. Z. S. SCIENCE COLLEGE, BRAMHANI-KALMESHWAR following all due protocols and regulations as per existing NAAC, Central, & State Governments guidelines issued from time to time, and also follow the local guidelines of the concerned district administration. This is to inform that the undersigned DR. A. K. TIKHE_is desiring to fully undertake the responsibility of Peer Team Visits of NAAC on our own free will and decision. I state that I am aware that it is entirely voluntary for me and my HEI to undertake the Peer Team Visits, and that I am doing so of my own free will, having understood the risks currently prevailing in commuting to, and executing the Peer Team related works in the current COVID-19 Pandemic.

I'm in good health and none of my faculty members, administrative staff and the student fraternity in the

K. Z. S. SCIENCE COLLEGE, BRAMHANI-KALMESHWAR are suffering from fever, cough and breathing problems for the past two weeks. We are not involving any individuals having any diseases, illness and asymptomatic conditions etc., in Peer Team Visit process. We will wear a face mask as well as any other necessary prescribed protective gear and maintain physical social distancing in 'the course of Peer Team Visit. I will self-monitor my health and other staff members and students in campus every day. In case of symptoms like fever, cough, flu-like symptoms and/or breathing problem then I will inform the same to concerned NAAC coordinator/Peer Team Members immediately and also I will consult a doctor in the campus and follow medical advice on my own. I understand that there is always a possibility of getting infected by the virus. The NAAC would not be responsible for any eventualities with respect to COVID-19/health situation during the course of Peer Team Visits at any stage. I on behalf of our HEI have read the SOPs/guidelines given by NAAC and fully agree to abide by the said rules and regulations. I fully understand the ground-situation and will undertake the Peer team visits with extreme precautions as per the extant guidelines issued by Central, State Government and local Administrative authorities with regards to Covid-19 and maintain good health.

HEI is aware and would abide by all rules and regulations of UGC guidelines with respect of opening of Institutions during the current pandemic situation. All the stakeholders on the campus will compulsorily wear mask, use sanitizers, thermal scanners, etc. and shall take care of social distancing norms as per the SOP of

Department of Health, Govt. of India from time to time. During the presentations and interactions, the person presenting or interacting with the Peer team can only wear Face shield, but shall take care of the social distance norms. The HEI shall ensure the availability of Hand Sanitizer at required places. Any programme/activity related to Peer Team Visit may have a maximum audience of not more than 50-60 personnel following social distancing norms. The program can be planned with minimum number of stakeholders. Large congregations must be avoided. I also undertake that good quality hotels list (three) with good hygiene in the nearest locality will be furnished to the NAAC for PTV. The HEI is ready to undertake the PTV and all the rules and regulations as regards Covid-19 framed by the Government of India are followed in to HEI will not involve faculty, students, employees or anyone who is affected by corona. The HEI will not involve any personnel who are asymptomatic and not in good health.

I further declare that the teaching / non-teaching staffs, the hospitality staff, the students on the campus involved in the Peer Team Visit has been administered with two doses/1st dose of COVID 19 vaccination.

We undertake to download and poses the certificate for verification.

Head of the HEI name: DR. A. K. TIKHE

Full Address with Pin code: K. Z. S. SCIENCE COLLEGE, BRAMHANI-KALMESHWAR DHAPEWADA ROAD, TEH.: KALMESHWAR

DIST: NAGPUR PIN CODE: 441501

Signature

/ Principal
KZS Science College
Bramhani, Kalmeshwar,

Dist. Nagpur.

(Seal)

AISHE code: C 18570

Place: BRAMHANI-KALMESHWAR

Date: 23/10/2024