Prop	osal	Date:			

Form - MCC-01

(Multi-Disciplinary Certification Course/Diploma certificate Program/Advanced Diploma Certificate Program Proposal Form)

Title of Proposed Course:	
Name of Institution:	
Name of collaborating Organiza*	ition(if any) :
Name of Course-In-Charge:	· //
•	se:
Total Course Hours :	
Type of Course: (AEC/SEC/VAC)	
	rse / SEC = Skill Enhancement Course / VAC = Value Added Course)
,	
Objective of the	
Course/Program:	
Pre-requisite:	
Expected Outcomes of the	
Course/Program:	
Course Nature :	
(Theory / Practical / Field	
based or Blended)	
Duration of the	
Course/Program:	
(In weeks and Hours)	
Eligibility Criteria of	
Participants:	
Total Maximum Seats allotted	
for the Course/Program:	
Proposed Fees per Credit	
Course/Program Syllabus (In Detail)	
(Attach Enclosure)	
Evaluation Pattern:	
(MCQ / Written / Practical /	
Blended	
Dielided	
	(Name and signature by Authorized official
	of the Institution with official seal)
	of the institution with official seary
[For Office Use] :	
Application Received Date:	Approved By:
Application Received Date.	Αρριονέα Βλ
Course Code allotted :	Approval Date:
ood. Se code dilotted .	
Signature by the University Offic	ial :