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INDIRA GANDHI COLLEGE, BOITAMARI
Data/Documents required for Data Centre
(Please submit all Information, Data and Documents in soft copy only)

PERSONAL PROFILE

1.	Name	Shashiprabha Ray	
2.	Department	Assamese	
3.	Present Designation	Assistant Professor	
4.	Specialization if any		
5.	Date of Birth	01/11/1987	
6.	Father's Name	Purandar Ray	
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12.	Date of Appointment: 23-10-2010	(Please submit scanned soft copies of DHE approval letter and joining report)	
12.	Bate 617 (pps://unional.2016.2016		
		M. A.	
	Highest Educational & Professional Qualification	Slet	
13. (a)			
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	Name of the Project/ Name of the Principal	Minor Research Project/Major Research Project: (Please submit scanned soft copies of approval letter) Department of Principal Investigator Year of Award Amount Sanctioned Duration of the	he Name of the Type
13. (b)	Endowments, Chairs Investigator/Co-invest		Funding Agency (Government/Non-
10. (b)	Endowments, ondits investigator/oo-invest	iligator roject	Government)
			Coroninona
		Seminar participation/Presentation: (Please submit scanned soft copies of all certificates)	
	SI No. Organized by Nation	nal/International Seminar Theme Participated/Paper presented Title of Paper	Date
40 ()			From To
13. (c)			

13. (d)	Title of Paper Name of the author/s	Department of t	he Teacher Nan	ne of Journal	Year of Publica	tion ISSN	Link to the recognition in UGC enlistment of the journal
13. (e)	Title of the Book Name of the author/s Published		hapters: (please subm Title of the procee the conference		ver page and content page of the he conference National/ International	Year of ISBN/ISSN	Affiliating Institute at Name of Publisher the time of publication
13. (f)	Ph.D./ D.M./M.Ch/ D. N. B D.N.B S	ion (Ph.D. /D.M/M.Ch./ Whether recouperspeciality/ D. Sc./ Guide for Pl	earch Guides: (please so ognised as research n. D./ D. M/M. Ch./ erspeciality/ D.Sc./	Year of Is the Recognition institutes as Research services.	copy of the relevant certificate) ne Teacher still serving the N tution/ if not last year of the ice of Faculty to the tution	Name of the Scholar	Year of the Title of the Thesis for Registration of Scholar the Scholar
14.	1.	Parti Name of HRDC	cipation in OP/RC/STC	C: (Please submit scanr Course Title	ed soft copies of all certificates)	From	То
15.	2. Participation in following activities of the Affiliating University: Say Yes or No (Please submit soft copies of relevant Letters/Orders) Academic Council Setting of Question Papers Design and Development of Curriculum Assessment & Evaluation Process Yes						
16.	Name of the Workshop/Training	Participation in Institution	Workshops, Training e	etc.: (please submit the Organized by	scanned copies of all relevant ce	ertificates) From	То
17.	Name of Faculty	Year 2021 (January – December) 2022 (January – December)	CL	Leave Records: DL SF	PL ML	EL RH	Permission
18.	SI No. Name	2023 (January –) of the Committee	Involven	nent in Committees/Sut Role (Convenor/Me			Year
19.	SI No. 1. 2.	Heads	Contribution to capa	ibility enhancement and	development Schemes: Cor	ntribution	
20.	3.		F	Participation in corporat	e life:		

21.	SI No.	Name of the Award	Awards/Recognition/Fellowship received during last 5 Years: (State/National/Inte Year	rnational) Awarding Authority				
22.	SI No.	Heads	Contribution to Extension Work/Community Service:	Contribution				
23.	Teaching: SI No.	Heads		Response				
24. Any other Information:								
Member:								
Life Member:								
Presiden	ıt:							

SI No.

Heads

N.B.: This is only a format; Teachers may use space as per their requirement or may insert rows if necessary.

Contribution