BEST Extension Activity OF THE UNIVERSITY

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| --- | --- |
| NAME OF THE DEPARTMENT |  |
| Name of HoD |  |
| Name of Extension activity Coordinator of the Department |  |
| EMAIL ID –( HoD) |  |
| CONTACT NUMBER(HoD) |  |

Nomination Form

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| --- | --- |
| Social Relevance of activity |  |
| CSR Compliance |  |
| How was it helpful to neighbourhood society |  |
| How innovative was the idea |  |
| Feed back from Beneficiary(communication to the effect to be provided) |  |
| How much funding was involves ( give source of funding) |  |
| How many local people was involved |  |
| How many villages was benefitted(how many were targeted) |  |
| Potential of the Activity towards greater Impact on Society/Environment | 1. ..................... 2. .................... 3. .......................... |
| Any other remark or achievements you like to highlight which will add on to your credentials as a Best Extension activity. |  |

**Declaration**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby declare that the particulars furnished by me in this nomination form are true to the best of my knowledge and belief. In case any information is found to be incorrect, my nomination shall liable to be rejected.

Signature of Coordinator

Signature of HoD