



POORNIMA

COLLEGE OF ENGINEERING

E14

FORTNIGHTLY ATTENDANCE ANALYSIS OF HOSTELLERS

ATTENDANCE EVALUATION FORM (TO BE FILLED FORTNIGHTLY) BY FACULTY ADVISOR

Name of Student: Year: Branch:

Duration:to Room No. Hostel Name: Institution

Name of Faculty Advisor:

S. No.	Attendance for Current Half	Cumulative Attendance	+/- Change From Last Cumulative	Reasons for if Decline in Attendance	Room Cleanliness	Behavior	Remarks By Faculty Advisor	Remarks by Coordinator	Remarks by Chief Coordinator
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

Remarks: Room Cleanliness: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor

Behaviour: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor

Signature of Faculty Advisor with Date



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REPORTING OF WEEKLY STUDENTS INTERACTION

STUDENT INTERACTION FORM (TO BE FILLED IN A WEEK): BY FACULTY ADVISOR

Name of Student: Year: Branch:

Duration:to Room No. Hostel Name: Institution

Name of Faculty Advisor:

S.No	Rating of Academics (0-5)			Total Grade (Out Of 15)	Problems Faced	Remedial Steps Taken/Suggestion Given	Remark by Faculty Advisor with Date	Remark by Coordinator with Date
	Class Notes Completed	Tut. Completed Till Date	Assignment / Lab Report					

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor



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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

REPORT BY FACULTY ADVISORS (TO BE SUBMITTED FORTNIGHTLY TO ACADEMIC ADMINISTRATOR)

Name of Faculty Advisor..... Hostel Name: Duration:to

1. % Students having Adequate Attendance (More than 75%) :
2. % Students having Adequate Rating (More 10 out of 15) :

S.No	Name of Students Whose			S.No	Name of Students Whose		
	Attendance of last 10 students in order	Class and Year	Room No.		Academic grade is less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			

Remarks: 5-Very Good, 4-Good, 3-Average, 2-Below Average, 1-Poor



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WEAK ATTENDANCE & ACADEMIC PERFORMERS OF HOSTELS

HOSTEL-WISE REPORT BY CHIEF ACADEMIC ADMINISTRATOR (TO BE SUBMITTED FORTNIGHTLY TO THE DIRECTOR)

Duration:to

Hostel Name:

S.No	Name of Students Whose			S.No	Name of Students Whose		
	Attendance of last 10 students in order	Class and Year	Room No.		Academic grade is less than 5	Class and Year	Room No.
1.				1.			
2.				2.			
3.				3.			
4.				4.			
5.				5.			
6.				6.			
7.				7.			
8.				8.			
9.				9.			
10.				10.			

Remarks by Director (Weekly).....

Signature of Chief Academic
Administrator with Date



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WEEKLY REPORT BY WARDEN

Duration:to

Hostel Name:

Date

S.No	Room Hygiene 5/4/3/2/1		Behavior 5/4/3/2/1		Attendance & Regularity Y/N		Discipline Good/Bad		Habits Good/Bad		S.No	Room Hygiene 5/4/3/2/1		Behavior 5/4/3/2/1		Attendance & Regularity Y/N		Discipline Good/Bad		Habits Good/Bad	
	Name of Student	College	Name of Student	College	Name of Student	College	Name of Student	College	Name of Student	College		Name of Student	College	Name of Student	College	Name of Student	College	Name of Student	College	Name of Student	College
1.											1.										
2.											2.										
3.											3.										
4.											4.										
5.											5.										
6.											6.										
7.											7.										
8.											8.										
9.											9.										
10.											10.										

Remarks By Warden	
Remarks By Chief Warden	
Remarks By Director	