

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY
REGIONAL SERVICES DIVISION
MAIDAN GARHI, NEW DELHI – 110 068.**

SOCIS

TRANSMISSION OF BIO-DATA FOR EMPANELMENT OF ACADEMIC COUNSELLORS FOR ALL MCA, BCA & CIC PROGRAMMES)

(To be Submitted Strictly Discipline-wise)

Letter No. :

Dated :

Regional Centre : Bangalore

Code : 13

(For use of Study Centre/Programme Study Centre)

SC/PSC: _____ SC Code: _____ Prog. Code: _____

Details of prospective Academic Counsellors (bio-data enclosed)

Sl. No (1)	Name (Use capital letters) (2)	Course(s) for which recommended by Coordinator/PIC (3)	Course-wise approval of school (To be filled in by the school) (4)	Signature of the Faculty Member(s) (5)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

COORDINATOR/PROGRAM I/c

We have scrutinized the bio-datas and the persons mentioned in the attached proforma are recommended for the empanelment of the Academic Counsellors for the courses mentioned at Column No.3 of the Proforma. Column 4 and 5 are to be filled up by the School.

REGIONAL DIRECTOR

DIRECTOR, SCHOOL OF COMPUTER & INFORMATION SCIENCES

Checked and approved as per the courses mentioned in Column No.4 of the Proforma

DIRECTOR, SCHOOL OF COMPUTER & INFORMATION SCIENCES

DIRECTOR(RSD)

**INDIRA GANDHI NATIONAL OPEN UNIVERSITY
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SOCIS - MCA

BIO-DATA PROFORMA FOR ACADEMIC COUNSELLORS OF MCA (Revised)

Name of the Prog. Study Centre : _____	PSC Code _____
Name of the Regional Centre : <u>Bangalore</u>	RC Code : <u>13</u>

1. Name (in block letters) :
2. Date of Birth :
3. Present Designation/Profession:
4. Residential Address :
(Mention Pin Code)
5. Official Address :
(Mention Pin Code)



Phone No. (Off) _____ (Resi) _____ (Mobile) _____

E-mail address : _____

6. Academic Qualifications: (Attach self-attested photocopies of the educational qualifications)

Degree	Branch / Specialization	University	Year of Passing	%
Ph.D				
M.Tech/M.S				
B.E/B.Tech				
MCA/M.Sc				
Any other qualifications				

7. Teaching / Industry Experience:

Level (UG/PG / Corporate training)	Position	University /Institution	Topics* Taught	No. of years of Teaching Experience	Period From To

* Please refer to the MCA structure in Page 4

8. Practical Experience :

SOFTWARE	EXPERIENCE OF WORKING WITH THIS S/W	PERIOD From To
OPERATING SYSTEMS		
WINDOWS 2000/ME/XP		
WINDOWS NT		
LINUX /UNIX		
SERVER S/W		
PWS IIS WINDOWS NT Specify the name of the other (if any		
SOFTWARE		
C / C++		
VISUAL BASIC		
RATIONAL ROSE / any other CASE tools (Specify the name)		
CASE 4.0 /TURBO ANALYST		
MICROSOFT PROJECT		
JAVA		
ORACLE 8 /8I		
TURBO ASSEMBLER /MICROSOFT ASSEMBLER/ Emu 8086		
LISP		
PROLOG		
MS FRONT PAGE		
TALLY		
Editor (ADOBE FRAMEMAKER / XML Pro		
Any XML Parser		
MACROMEDIA FLASH		
MACROMEDIA DIRECTOR		
MACROMEDIA DREAM WEAVER		
COREL DRAW		
ADOBE PHOTOSHOP		

9. Please mention priority wise, the choice of courses you would like to counsel for :
(see below for the structure of MCA Programme and eligibility criteria for coursewise counselor)

SEMESTER	COURSE CODES
I	
II	
III	
IV	
V	

10. Any other relevant information :

DECLARATION

I hereby declare that the information given above is correct. I accept to undertake the task of academic Counselling.

Date:

Place :

Signature of the Applicant

FOR USE AT THE STUDY CENTRE

Recommended for the appointment of academic counselor for the following courses :

SEMESTER	COURSE CODES
I	
II	
III	
IV	
V	

Date:

Place :

Signature of the Coordinator /Programme In-charge

FOR USE AT THE REGIONAL CENTRE

Recommended for the appointment of academic counselor for the following courses :

SEMESTER	COURSE CODES
I	
II	
III	
IV	
V	

Assistant Regional Director

Date:

Place :

Signature of the Regional Director

Eligibility criteria for Academic Counsellors :

MCA (Revised) COURSE CODES	Educational Qualifications for Academic Counsellors
MCS-011, 012, 014, 021, 023, 024, 031, 032, 034, 041, 042, 043, 051, 052, 053, MCSE 001 TO 012	1. Ph.D in Computer Science/ M.Tech (Computer Science/IT) /MS(Computer Science /IT / Software systems) /M.Phil (Computers) OR 2. B.Tech(Computer Science/IT) / B.E(Computer Science/IT) / MCA /M.Sc(Computer Science/IT) with at least 2 years of experience in teaching /industry
MCSL-016, MCSL-017, MCSL-025, MCSL-036, MCSL-045, MCSL-054	1. Ph.D in Computer Science/ M.Tech (Computer Science/IT) /MS(Computer Science/IT / Software systems) /M.Phil (Computers) OR 2. B.Tech(Computer Science/IT) / B.E(Computer Science/IT) / MCA /M.Sc(Computer Science/IT) with at least 2 years of experience of working with the software (related to the lab course whose details are given below)
MCS-013 AND MCS-033	M.Sc (Maths) or above with at least 2 years of teaching experience
MCS-035	MBA(Finance) / M.Com or above with at least 2 years of experience in teaching of Post graduate level and knowledge in accounting software packages.
MCS-015	MA(English) or above with at least 2 years of experience in teaching preferably in Linguistics / ELT

COUNSELLING SESSIONS FOR MCA(REVISED) PROGRAMME

I SEMESTER						II SEMESTER				
Year	Course Code	Course Title	Credits	No. of theory sessions (2 hors each)	No. of Practical sessions (3 hours each)	Course Code	Course Title	Credits	No. of theory sessions (2 hors each)	No. of Practical sessions (3 hours each)
I	MCS-011	Problem solving and programming	3	5	2 [^]	MCS-021	Data and File structures	4	8	
	MCS-012	Computer Organisation and assembly language programming	4	8	2 [^]	MCS-022	Operating sys. & concept networkmgmt.	4	8	2 [^]
	MCS-013	Discrete Mathematics	2	3		MCS-23	Introduction to DBMS	3	5	2 [^]
	MCS-014	Systems Analysis and Design	3	5		MCS-024	Object oriented tech. & Java Programming	3	5	2 [^]
	MCS-015	Communication skills	2	2		MCSL-025	Lab (based on MCS-021, 022,023 & 024)	4		(10+10+10+10)
	MCSL-016	Internet Concepts and Web Design	2		20					
	MCSL-017	C and Assembly Lang. programming lab	2		(10+10)					
III SEMESTER						IV SEMESTER				
II	MCS-031	Design and analysis of algorithms	4	8	2 [^]	MCS-041	Operating Systems	4	8	
	MCS-032	Object oriented analysis and design	3	5	2 [^]	MCS-042	Data communication and computer networks	4	8	3 [^]
	MCS-33	Advanced discrete mathematics	2	3		MCS-043	Advanced database management systems	4	8	3 [^]
	MCS-034	Software Engineering	3	5		MCS-044	Mini Project	4		10
	MCS-035	Accountancy and financial management	4	8		MCSL-045	Lab (Unix & Oracle)	2		(10+10)
	MCSL-036	Lab (based on MCS-032, -34and 035)	2		20					
V SEMESTER						VI SEMESTER				
III	MCS-051	Advancedinternet technologies	3	5	2 [^]	MCSP-060	Project	16	2#	
	MCS-052	Principles of Management and information systems	2	3						
	MCS-053	Computer graphics and multimedia	4	8	3 [^]					
	MCSL-054	Lab (based on MCS-051 & 053)	2		(10+10)					
	MCSE-001 to 012	3 Stream* courses	9	(5+5+5)	5 [^]					

- student should select one stream from the available streams, each comprising of 3 courses

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**BIO-DATA FORM FOR ACADEMIC COUNSELLORS
(To be filled in by the candidate)**

Study Centre Name: _____ Study Centre Code: _____ Programme: _____

II. GENERAL INFORMATION:

1. Name (in block letters) : _____

2. Date of Birth : _____

3. Present Designation/Profession: _____

4. Office Address : _____

Phone No. (O): _____

5. Residential Address : _____

Phone No. (R): _____

Affix Self attested
latest Photograph

6. Academic Qualifications: (Attach self-attested photocopies of the educational qualifications)

Educational Qualification	University	Year	Discipline
Ph.D.			
M.Tech/M.E (Computer/ Electronics/ Electrical)			
MCA (Master's Degree in Computer Science)			
M.Sc. (Computer Science)			
B.Tech/B.E (Computer/ Electronics/ Electrical)			
B. Sc (Computer Science)			
Any other relevant Educational/Professional qualification			

7. Details of Teaching Experience:

Level	Courses Taught	Tutorial/Teaching Experience	Name of the Institution	Total Teaching Experience
Under Graduate				
Post Graduate				

8. Research and Publication

(A) (I) Research Topic

M.Phil. :

Ph.D. :

(ii) Area of Research currently involved: _____

(iii) Details of Research Work/Project Work guided: _____

(B) Publications: (Give details of publications like title of the article, Journal/book, year of publication, etc. and add additional sheets, if required).

Articles: _____

Books: _____

9. Experiences in the Distance Education System.

A. Familiarity with Distance Education material (Please tick mark)

Course writing _____ A/V script writing _____ Evaluation work _____

B. Previous experiences in counselling through Distance Education mode, if any.

No. of Years	Courses counseled	Place/Institution

10. Have you made/used any innovations in teaching: (please give details).

11. Do you belong to SC/ST?

12. Would you be interested in undertaking any other activities for the university like undertaking of survey and feedback for the courses on offer, preparation of question bank etc.

Yes/No: If yes, please specify:

13. Other relevant information, if any:

14. If enrolled as a student of IGNOU, please give the following details.

Programme: Enrolment No: Present Status:
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PART-II

II. EXPERIENCE IN THE FIELD OF COMPUTER SCIENCES

15. Professional Experience:

- i) Years of teaching experience at BCA / B.Sc (Computer Science): _____
- ii) Years of Teaching Experience at MCA/ M.Sc (Computer Science):: _____
- iii) Years of Teaching Experience at BE / B.Tech. : _____
- iv) Years of Teaching Experience at ME / M.Tech. : _____

Total years of Teaching Experience: _____

Years of Experience in Software Development: _____

Any other, Specify: _____

16. Knowledge of Computer Language/Package/Utilities:

Knowledge of computer Language/Package/ Utilities	Has working Experience: Yes / No
BASIC	
COBOL	
PASCAL/C	
DATA BASE (dBASE III PLUS)	
LOTUS 1-2-3	
FORTRAN	
WORDSTAR	
COMPUTER COMMUNICATION (LAN, WAN ETC.)	
EXPERT SYSTEM	
MS-DOS/UNIX/SYSTEM ANALYSIS & DESIGN	
OTHERS (Please specify)	
SYSTEM HANDLED	IBM Compatible PC :YES / NO IBM Compatible AT/XT :YES / NO Mini Computer :YES / NO Mainframe :YES / NO Any other system :YES / NO

III. CHOICE OF COURSES FOR COUNSELLING:

17. Please mention priority-wise, the choice of courses you would like to do counselling for IGNOU (see the syllabi of the concerned programme)

COURSE CODE	COURSE TITLE	Willing to counsel: YES/NO
CS-610	Foundation Course in English for Computing	
CS-611	Computer Fundamentals & Introduction to Software	
CS-612	PC Software Application Skills	
CS-60	Foundation Course in Mathematics in Computing	
CS-62	C-Programme & Data Structure	
CS-63	Introduction to System Software	
CS-05	Elements of System Analysis & Design	
CS-06	Introduction to DBMS	
CS-64	Introduction to Computer Organisation	
CS-65	Window Programming	
CS-66	Multi-media	
CS-67	RDBMS – Lab	
CS-68	Computer Network	
CS-69	TCP/IP Programming	
CS-70	Introduction to Software Engineering	
CS-71	Computer Oriented Numerical Techniques	
CS-72	C++ and Object Oriented Programming	
CS-73	Theory of Computer Science	
CS-74	Introduction to Internet Programming (JAVA, ActiveX)	
CS-75	Internet Administration	
CS-76	Project	
FHS-01	Foundation Course in Humanities & Social Sciences	
FST	Foundation Course in Science & Technology	

18. The language(s) in which you will be able to counsel

English Hindi Regional language

19. Please indicate your choice of study centre in the order of preference:

Sl.No.	Study Centre Code	Name of the Study Centre

I hereby declare that the information given above is correct. I accept to undertake the tasks of academic counselling and evaluation of assignment scripts. Photocopies of Educational and Professional qualification documents enclosed.

Place: _____
Date: _____ SIGNATURE

FOR USE AT THE STUDY CENTRE

Verified the eligibility and the documents. Recommended for appointment as a part-time Academic Counsellor.

Place: _____
Date: _____ **Signature of the Coordinator with stamp**

FOR USE AT THE REGIONAL CENTRE

Recommended for appointment for the following courses:

Place: **BANGALORE 560 082** **Signature of the Regional Director (with stamp)**
Date: _____

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(To be filled in by the candidate)**

Study Centre Name: _____ Study Centre Code: _____ Programme: _____

III. GENERAL INFORMATION:

1. Name (in block letters) : _____

2. Date of Birth : _____

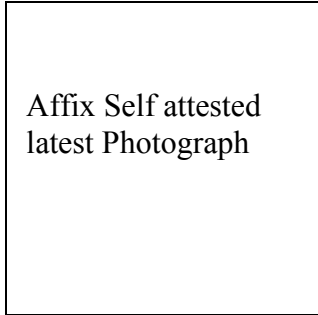
3. Present Designation/Profession: _____

4. Office Address : _____

_____ Phone No. (O): _____

5. Residential Address : _____

_____ Phone No. (R): _____



6. Academic Qualifications: (Attach self-attested photocopies of the educational qualifications)

Educational Qualification	University	Year	Discipline
Ph.D.			
M.Tech/M.E (Computer/ Electronics/ Electrical)			
MCA (Master's Degree in Computer Science)			
M.Sc. (Computer Science)			
B.Tech/B.E (Computer/ Electronics/ Electrical)			
B. Sc (Computer Science)			
Any other relevant Educational/Professional qualification			

7. Details of Teaching Experience:

Level	Courses Taught	Tutorial/Teaching Experience	Name of the Institution	Total Teaching Experience
Under Graduate				
Post Graduate				

8. Research and Publication

(A) (i) Research Topic

M.Phil. :

Ph.D. :

(ii) Area of Research currently involved: _____

(iii) Details of Research Work/Project Work guided: _____

(B) Publications: (Give details of publications like title of the article, Journal/book, year of publication, etc. and add additional sheets, if required).

Articles: _____

Books: _____

9. Experiences in the Distance Education System.

15. Familiarity with Distance Education material (Please tick mark)

Course writing _____ A/V script writing _____ Evaluation work _____

16. Previous experiences in counselling through Distance Education mode, if any.

No. of Years	Courses counseled	Place/Institution

10. Have you made/used any innovations in teaching: (please give details).

11. Do you belong to SC/ST?

12. Would you be interested in undertaking any other activities for the university like undertaking of survey and feedback for the courses on offer, preparation of question bank etc.

Yes/No: If yes, please specify:

13. Other relevant information, if any:

14. If enrolled as a student of IGNOU, please give the following details.

Programme: Enrolment No: Present Status:
Programme: Enrolment No: Present Status:

II. EXPERIENCE IN THE FIELD OF COMPUTER SCIENCES

15. Professional Experience:

- i) Years of teaching experience at BCA / B.Sc (Computer Science): _____
- ii) Years of Teaching Experience at MCA/ M.Sc (Computer Science):: _____
- iii) Years of Teaching Experience at BE / B.Tech. : _____
- iv) Years of Teaching Experience at ME / M.Tech. : _____

Total years of Teaching Experience: _____

Years of Experience in Software Development: _____

Any other, Specify: _____

15. Knowledge of Computer Language/Package/Utilities:

Knowledge of computer Language/Package/Utilities	Has working Experience: Yes / No
BASIC	
COBOL	
PASCAL/C	
DATA BASE (Dbase III PLUS)	
LOTUS 1-2-3	
FORTRAN	
WORDSTAR	
COMPUTER COMMUNICATION (LAN, WAN ETC.)	
EXPERT SYSTEM	
MS-DOS/UNIX/SYSTEM ANALYSIS & DESIGN	
OTHERS (Please specify)	
SYSTEM HANDLED	IBM Compatible PC :YES / NO IBM Compatible AT/XT :YES / NO Mini Computer :YES / NO Mainframe :YES / NO Any other system :YES / NO

IV. CHOICE OF COURSES FOR COUNSELLING:

17. Please mention priority-wise, the choice of courses you would like to do counselling for IGNOU (see the syllabi of the concerned programme)

COURSE CODE	COURSR TILLE	Willing to counsel: YES / NO
CIC-1	The Context : (The information society, Coping with complexity, Problem solving techniques & Information systems development)	
CIC-2	The Technology: (Hardware, Software, Communication & Computer security and virus)	
CIC-4	The Application: (Office automation application, Business application, Multi-media applications & Large public service applications)	
CIC-5	MS-Office: (MS-Windows, MS-Word, MS-Excel & MS-Power point)	

18. The language(s) in which you will be able to counsel

English Hindi Regional language

19. Please indicate your choice of study centre in the order of preference:

Sl.No.	Study Centre Code	Name of the Study Centre

I hereby declare that the information given above is correct. I accept to undertake the tasks of academic counselling and evaluation of assignment scripts. Photocopies of Educational and Professional qualification documents enclosed.

Place:

Date:

SIGNATURE

FOR USE AT THE STUDY CENTRE

Verified the eligibility and the documents. Recommended for appointment as a part-time Academic Counsellor.

Place:

Date:

Signature of the Coordinator with stamp

FOR USE AT THE REGIONAL CENTRE

Recommended for appointment for the following courses:

Place: **BANGALORE 560 082**

Date:

**Signature of the Regional Director
(with stamp)**