



Doc No:- ZEAL/ZB/

Revision: 00

Date:01/09/2023

CRITERION: 6-GOVERNANCE, LEADERSHIP AND MANAGEMENT

Key Indicator - 6.3.1 Faculty Empowerment Strategies

6.3.1 The institution has effective welfare measures for teaching & non-teaching staff. Institution has the following measures for welfare of employees.

The institution always takes up the responsibility of welfare of teaching and non-teaching staff.

Sr.No	Attachment
1	Faculty Welfare measures







Programme - MBA & MCA

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1. Faculty Welfare measures

Provident Fund



कर्मचारी भविष्य जिम्सि संगठन Employees' Provident Fund Organization अविष्य विभिन्ने अवस्त, १४, औकाओं बामा प्लेस, सप्ने दिश्ली - ११००६६ Disamblya Nalbi Bhassan, 14, Bhkai) Cama Plate, New Balti. 110066

TRRN Details

TRRN No	3152305010431
Challan Status	Payment Confirmed
Challan Generated On	09-MAY-2023 14:45:56
Establishment ID	PUPUN003753000
Establishment Name	ZEAL EDUCATION SOCIETY
Challan Type:	Monthly Contribution Challan
Total Members	24
Wage Month :	APR-20
Total Amount (Rs):	85.607
Account-1 Amount (Rs):	53.648
Account-2 Amount (Rs)	1,712
Account-10 Amount (Rs)	28,534
Account-21 Amount (Rs)	1,713
Account-22 Amount (Rs)	0
Payment Confirmation Bank:	ICICI Bark
CRN:	229150523017840
Presentation Date :	15-MAY-2023 00:00 00
Realization Date	16-MAY-2023-00:00 00
Date of Credit:	15-MAY-2023 00:00 00
Total PMRPY Benefit	0







Programme - MBA & MCA

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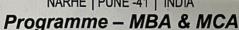
Date:01/09/2023

ave Application	ZEAL INSTITUTE OF BUSINESS ADMINISTRATION, COMPUTER APPLICATION AND RESEARCH (ZIBACAR) NARIE PUNE INDIA
	PUN CODE: IMMP013170 DTE CODE: 6152 AISHE CODE: C-41828 APPLICATION FOR CL/SL/MIJ/OD/ CODE:
	Name: Port Ashak Dookers Designation: Asst prot
	Sir/Madam. Kindly sanction me Ol days leave from 3/10/24 to 3/10/24 Prefix/Suffix (Being Sunday/Hollday) — Total Period el days.
	I will be reporting my duty on 011e6124 Reason for Leave person of work at my description such col
	Sr. No. Name of the Alternative staff Member Teaching Load/ Duty
	1 Provin guryewanti oury
	Thacking you, Yours faithfully,
	Date: 0/106/14 Yours faithfully, Hand Signature of Applicant Signature of Applicant
	Remarks of Administration Section regarding bulance of Leave
	Total CI: Total MI: Total VI: Total COFF Availed: (OD Availed:
	Delance of CL: Balance of ML — Balance of VL: Belance of COFF: 3 Bul. of OD:
	Signature of Admin.Section
	Remarks Leave Sangtharied / New Sangtharied
	LIGHT TOR BIJAD MANAGEMENT PROGRAMME





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Revision: 00

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Faculty Appreciation for clearing the SET



Women's day Celebration









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Different Activities for Teaching and Non-Teaching Staff like-Zumba, Yoga, Dance



College Library



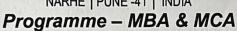
Gym-Facility







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Date:01/09/2023

Festivals Celebration



Navratri colour celebration

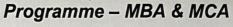








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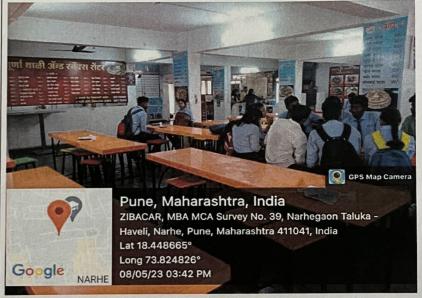


Date:01/09/2023

Birthday Celebration



College Canteen









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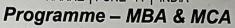
Computer and printers **Security Facility**

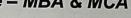






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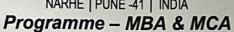


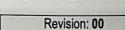


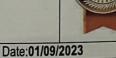




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Parking Facility







Zeal Institute of Business Administration Computer Application 2. Pacarch 7 - 1/1041.