INSTITUTE OF AERONAUTICAL ENGINEERING

(Autonomous)

Dundigal, Hyderabad - 500 043

ACADEMIC AUDIT FORM: DD / MM / YYYY – DD / MM / YYYY
2020 - 2021

Employee ID:

Employee Name: **Designation:**   **Department:**

1. Course Content Delivery

S No	Course Code	Course Name	Branch	Semester	Section	Program UG / PG	Early Semester Feedback	End Semester OBE Feedback	No of Classes		Signature of the Faculty
									Scheduled	Conducted	

2. Availability of Course Content

Syllabus	Course Description	Definitions and Terminology	Tutorial Question Bank	Concept Video	Tech- Talk	Open Ended Experiments	Model Question Paper I and II	PPTS	Lecture Notes	Video Lectures

Comments and Suggestions:

Name and Signature of Committee members:

1. **Subject Expert 1:**

2. **Subject Expert 2:**

3. **Signature of HOD:**

4. **Dean Academic:**

5. **Dean UG and PG Studies:**

6. **Dean Center for Learning and Educational Technologies**:

7. **Dean Information and Communications Technology:**

PRINCIPAL