

List of professional development programs attended by teachers, viz., Orientation Program, Refresher Course, Short Term Course, Faculty Development Programs during the academic year 2024- 2025

Name of the Faculty : BIJO JOSEPH

Designation : Assistant Professor

Department : ARTS

**Experience in years** 

(As on Nov 2024) : Two and half years

#### Qualification:

Name of Degre e	Programm e	Institution/University	Year of Passing
PG	CINEMA AND TELEVISION	St. Joseph College of Communication, Media Village, Kurishummoodu, Changanassery (MG University, Kottayam)	2024
UG	B.Ed.	Christ University (Deemed to be University), Bangalore	2015

## a. Books Published:

S.N o	Type of Work	Titl e	Title of Book/Chapter/Article/Case Study	ISB N	Month Year	Kindly attach copy of certificate
1	-	-	-	-	-	-

## b. Invited talks by faculty (as resource person)

SI.N o	Title of the Program	Name of the program	Mode of the Programme (Online/ Offline)	Dat e	Name of the institution	Kindly attach copy of certificate & Brochure
-	-	-	-	-	-	-

## c. Conferences attended/Presented by faculty

## i. Participation in Seminar/Conference/Symposium:

SI N o.	Type of Progra m	Role (Participated/Prese nted)	Mode of the Program me (Online/ Offline)	Name of Progra m	Title of Pap er	Dat e	Organisi ng Instituti on	Lev el	Kindly attach copy of certifica te
1	-	-	-	-	-	-	-	-	-

## d. Journal publications by faculty

#### i. Articles in Periodicals:

SI.N	Titl	Name of	Periodicit	Dat	Kindly attach copy of certificate
o	e	Periodical	y	e	
-	-	-	-	-	-

#### ii. Articles in Journals:

SI.N o	Titl e	Name of Journal	Date of Publication	Vol. No./Issue No./Page No.	Kindly attach copy of certificate
1		-	-	-	-

- e. Teachers Projects (Attach proof if any)
- e. i) Teachers doing/completed PhD

SI.N o	Title of the thesis	Universit y	Pursuing/Complete d	Month Year	Kindly attach copy of certificate
1	-	-	-	-	-

## ii) MPhil/PhD Guided/Adjudicated:

SI.N	Titl	Name of	Institutio	Month	Kindly attach copy of certificate
o	e	Student	n	Year	
-	-	-	-	-	-

- g. Patent, FIST.... (Attach proof if any) NIL
- g. Faculty rewards & recognition (Attach proof if any) NIL
- i. Professional Development Programmes attended by faculty
  - a. Workshop/FDP/Training Programme Attended:

SI.N o	Name of the Workshop/FDP/Training Programme	Name of Organiser	Mode of the Programme (Online/ Offline)	Leve I	Dat e	Kindly attach copy of certificate
-	-	-	-	-	-	-

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## b) Webinars Attended:

SI.N	Topic of the	Name of	Leve	Dat	Kindly attach copy of certificate
o	Webinar	Organiser	I	e	
-	-	-	-	-	-

# c) E-Quiz Attended:

SI.N o	Topic	Name of Organiser	Leve I	Dat e	Kindly attach copy of certificate
-	-	-	-	-	-

## d) Certificate Courses Completed:

SI.N o	Name of the Course	Duration of the Course	Mode of the Programme (Online/Offline)	Date of completion	Certified By	Kindly attach copy of certificate
-	-	-	-	-	-	-