

THE ANNUAL QUALITY ASSURANCE REPORT (AQAR) OF THE IQAC

ACADEMIC YEAR 2016-17

Part – A

I. Details of the Institution

1.1 Name of the Institution

NARAYANA MEDICAL COLLEGE AND HOSPITAL

1.2 Address Line 1

CHINTHAREDDYPALEM

Address Line 2

NELLORE

City/Town

NELLORE

State

ANDHRA PRADESH

Pin Code

524003

Institution e-mail address

narayanamedical@yahoo.com

Contact Nos.

0861-2317963,68 Fax:0861-2317962

Name of the Head of the Institution:

Dr.G.VEERA NAGI REDDY

Tel. No. with STD Code:

0861-2317965

Mobile:

09885417989

Name of the IQAC Co-ordinator:

Dr.P.SREENIVASULU REDDY

Uploaded to
NAAC
on 26/7/2017



Mobile:

09848756474

IQAC e-mail address:

iqacnahe@gmail.com

1.3 NAAC Track ID (For ex. MHCOGN 18879)

APCOGN25053

1.4 NAAC Executive Committee No. & Date:

*(For Example EC/32/A&A/143 dated 3-5-2004.
This EC no. is available in the right corner- bottom
of your institution's Accreditation Certificate)*

NAAC/WH/Cert-A&A/EC(12th
SC)/1.1/2016 66 TH MEETING
DATED.21.02.2014.

1.5 Website address:

www.narayanamedicalcollege.com

Web-link of the AQAR:

1.6 Accreditation Details

Sl. No.	Cycle	Grade	CGPA	Year of Accreditation	Validity Period
1	1 st Cycle	"A"	3.07	2016	19.02.2016 to 18.02.2021

1.7 Date of Establishment of IQAC : DD/MM/YYYY

1.8 AQAR for the year (for example 2010-11)

2016-2017

1.9 Details of the previous year's AQAR submitted to NAAC after the latest Assessment and Accreditation by NAAC (for example AQAR 2010-11 submitted to NAAC on 12-10-2011)✓