- 1. Name of Department / Committee / Cell: Physical Education
- 2. Name of the Event / Activity: Departmental Seminar

3. Date(s) of the event: 27.03,2019

4. Venue of the Event: P.N. Das College, Room NO-112

- 5. Nature of the Activity (Tick / underline the applicable choice): programme / function / event / competition / lecture / exhibition / camp / workshop / training / extension activity / rally / campaign / drive / celebration of days / extending help in terms of students, expertise, experience, etc.
- Level of the activity (Tick / underline the applicable choice): International / National / State / University / District / College / Local / Village / Gram Panchayet
- 7. Name of the Sponsor: Dept. of Physical Education.

8. Name of the Collaborator, if any:

9. Purpose / Aims / Objectives of the event:

1. To gather more knowledge about subject matter.

2. To develop personality.

3. To gather experiences about seminar presentation.

10. Names and designations / professions of dignitaries, guests, participants:

Capacity	Name	Designation / Profession / Affiliating Institute / Organization
Chairperson	Dr. Ajit Das	Assitt, Professor, P.N.Das College
Inaugurator	× ×	•
Chief Guest		
Guest(s)		
	1 N	
Resource Person(s)		
Participant Speakers	Mrinmoyee Paul	Students, P.N. Doe College.
	Mrinmoyee Paul Rahul Basak	11 11
	Bijan Bala.	1) 11
	Bijan Bala. Sanrat Biswas	h 11

- 11. Name(s) of the Anchor(s): Dr. Azit Das
- 12. Other staff/students involved in the organization of the event:
- 13. Beneficiaries / participants / audience (Type and/or number): Students
- 14. Outcome of the activity [Tick or underline the suitable alternative(s) and give details]: awareness / prizes won / social service / personality development (name the aspects) / skill testing or development, etc.
- 15. Quantitative information: Number of teachers, students, participants, teams, events, categories, colleges, universities involved in the organization of the event:
 - a. No. of Teacher: 01
 - b. No. of Students present: 23
 - C. No. of presenters: 04
- 16. Any other information/report/remarks/comments:
- 17. Photographs (with captions) submitted (number):
- 18. Evidence produced (Lists, Certificates, letters, newspaper cuttings, etc.):

Signature & Name of Teacher/Person submitting the Report with Date

- 1. Name of Department / Committee / Cell: Physical Education
- 2. Name of the Event / Activity: Wall Magazine
- 3. Date(s) of the event: 30.11.2018
- 4. Venue of the Event: P.N. Das College
- 5. Nature of the Activity (Tick / underline the applicable choice): programme / function / event / competition / lecture / exhibition / camp / workshop / training / extension activity / rally / campaign / drive / celebration of days / extending help in terms of students, expertise, experience, etc.
- 6. Level of the activity (Tick / underline the applicable choice): International / National / State / University / District / College / Local / Village / Gram Panchayet
- 7. Name of the Sponsor: Dept. of Physical Education.
- 8. Name of the Collaborator, if any:
- 9. Purpose / Aims / Objectives of the event:

1. To develop Creativity.

2. To develop cooperation with each other.

3. To develop writing ability and thinking power.

10. Names and designations / professions of dignitaries, guests, participants:

Capacity	Name	Designation / Profession / Affiliating Institute / Organization
Chairperson	WARRIED TO THE STATE OF THE STA	
Inaugurator	380	
Chief Guest		
Guest(s)		
. }		
Resource		
Person(s)		
Participant Speakers	•	
23	8	
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Name(s) of the Anchor(s)):	
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12. Other staff/students involved in the organization of the event:

13. Beneficiaries / participants / audience (Type and/or number): Students

14. Outcome of the activity [Tick or underline the suitable alternative(s) and give details]: awareness / prizes won / social service / personality development (name the aspects) / skill testing or development, etc.

15. Quantitative information: Number of teachers, students, participants, teams, events, categories, colleges, universities involved in the organization of the event:

a. No. of Teacher: 01 b. No. of Students participation: 07

16. Any other information/report/remarks/comments:

17. Photographs (with captions) submitted (number):

18. Evidence produced (Lists, Certificates, letters, newspaper cuttings, etc.):

Signature & Name of Teacher/Person submitting the Report with Date