

**P.N. Das College**  
**Event / Activity Report**

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1. Name of Department / Committee / Cell: Mathematics
2. Name of the Event / Activity: Student Seminar
3. Date(s) of the event: 2.4.2019
4. Venue of the Event: P N Das College Virtual Class Room
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 Panchayat: Departmental*
7. Name of the Sponsor / Collaborator, if any: Department
8. Purpose / Aims / Objectives of the event: Alternative learning and IT skill development
9. Names and designations / professions of dignitaries, guests, participants:

Capacity	Name	signation / Profession / Affiliating Institute / Organization
Chairperson		
Inaugurator		
Chief Guest		
Guest(s)		
Resource Person(s)		

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Participant Speakers	<b>EESHA DAS</b>	<b>B. Sc. general</b>
	<b>Goutam Chakraborty</b>	<b>B. Sc. general</b>
	<b>Sudeshna Saha</b>	<b>B. Sc. general</b>
	<b>Suranjan Senapati</b>	<b>B. Sc. general</b>

10. Name(s) of the Anchor(s): **Dr. Bablu Biswas**

11. Other staff/students involved in the organization of the event:

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

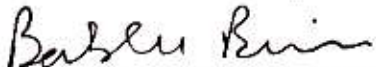
13. Outcome of the activity [Tick or underline the suitable alternative(s) and give details]:  
*awareness / prizes won / social service / personality development (name the aspects) / skill testing or development, etc.*

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

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

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

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

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

**P.N. Das College**  
**Event / Activity Report**

1. Name of Department / Committee / Cell: **Mathematics**
2. Name of the Event / Activity: **Wall Magazine**
3. Date(s) of the event: **3<sup>rd</sup> April, 2019**
4. Venue of the Event: **Science Building**
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: **Departmental***
7. Name of the Sponsor / Collaborator, if any: **Department**
8. Purpose / Aims / Objectives of the event: Collaborative Learning.
9. Names and designations / professions of dignitaries, guests, participants:

Capacity	Name	gnation / Profession / Affiliating Institute / Organization
Chairperson		
Inaugurator		
Chief Guest		
Guest(s)		
Resource Person(s)		
Participants	<b>EESHA DAS</b>	<b>B. Sc. general</b>

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	Goutam Chakraborty	B. Sc. general
	Sudeshna Saha	B. Sc. general
	Suranjan Senapati	B. Sc. general
	Samapti Sarkar	B. Sc. General

10. Name(s) of the Anchor(s):

11. Other staff/students involved in the organization of the event:

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

13. 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.

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

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

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

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



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