## **Event / Activity Report**

1. Name of the Cell : Education

2. Name of the Event/Activity : Celebration of Teachers Day

3. **Mode of Event/Activity** : Offline

4. **Date(s)& Time oftheevent** : 05<sup>th</sup> September ,2022 . from 9am-10am

5. Venue of the Event : College Campus
6. Nature of the Activity : Celebration day
7. Financial Details : Students fund

8. Level oftheactivity : College

9. Name of the Sponsor :Nil

10. Name of the Collaborator, if any: IQAC

11. **Objectives:** To enrichment knowledge of the place and contribution in education of Tagore

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

		Designation / Profession / Affiliating Institute
Capacity	Name	/ Organization
	Dr.Subrata Chatterjee	Principal at Sree Chaitanya Mahavidyala
Chairperson/Patron		·
	Dr. Subrata Chatterjee	Principal at Sree Chaitanya Mahavidyala
Inaugurator	· ·	, ,

- 13. Name of the Anchor: Shatabdi Chakraborty
- 14. **Mode of involvement of Support Staff/Students in the organization of the event**: Offline mode participation.
- 15. Beneficiaries / participants / audience (Type and/or number): 40
- 16. Outcome of the activity with Methodology: Knowledge Development about Dr. Sarbhapalli Radhakrisnan
- 17. **Quantitative information**: Teacher, students, participant involved in the organization of the event.

**Teachers**-03, Students-40

18. **Photographs:** Annexture 1

## **Annexure-I:**



