



ವಿಶ್ವೇಶ್ವರಯ್ಯ ತಾಂತ್ರಿಕ ವಿಶ್ವವಿದ್ಯಾಲಯ
 ವಿಟಿಯು ಅಧಿನಿಯಮ ೧೯೯೪ರ ಅಡಿಯಲ್ಲಿ ಕರ್ನಾಟಕ ಸರ್ಕಾರದಿಂದ ಸ್ಥಾಪಿತವಾದ ರಾಜ್ಯವಿಶ್ವವಿದ್ಯಾಲಯ
VISVESVARAYA TECHNOLOGICAL UNIVERSITY
 State University of Government of Karnataka Established as per the VTU Act, 1994 "JnanaSangama" Belagavi-590018, Karnataka, India



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REGISTRAR

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REF: VTU/BGM/Skill lab/1016/2026-27/ **3216**

DATE:

18 SEP 2026

CIRCULAR

Subject: Inviting application for Establishment of Skill labs and Review of Skill Labs Submitted for Approval Regarding.

Reference: The proceeding no. 2.2.1 of 190th EC meeting held on 25th August 2026
 The Hon'ble Vice-Chancellor's approval dated: 16.09.2026

An affiliated college that does not have a University-approved Skill Lab shall establish new facility/lab to provide additional skill training that is beyond the prescribed curriculum. Such skill labs are exclusively for skilling purpose, and shall not be considered or used for conducting experiments of a curriculum course, of any academic programme.

The new Skill Lab proposals submitted/ established by the colleges shall be reviewed by an exclusive Committee constituted with the approval of the Hon'ble Vice-Chancellor, on submitting a proposal to the Registrar, VTU, Belagavi, for inspection and approval. Further, the details of the Skill Labs already uploaded on the VTU website shall be inspected by a Committee during its ensuing visit for continuation of affiliation.

Submission of a skill labs proposal, by itself, shall not constitute an approval. A Skill Lab shall be considered approved only upon the formal inspection and approval issued by the University.

An affiliated (Autonomous and nonautonomous) colleges/ University departments and constituent colleges having valid University approval for its Skill Lab(s) shall not only use for its admitted students, but also shall provide an opportunity for use by the students of other affiliated institutions, when requested for the same.

Encl: Application format

Paul/18/09/26

REGISTRAR

To,

The principals of affiliated (Constituent, Non-autonomous and Autonomous) engineering colleges under the ambit of the university.

The Chairpersons/Programme coordinator of university departments at Bengaluru, Belagavi, Kalaburgi, Mysuru and Talkal

Copy to.

1. To the Hon'ble Vice-Chancellor, through the Secretary to the VC, VTU Belagavi, for information
2. The Registrar (Evaluation), VTU Belagavi, for information and the needful.
3. The Director ITI SMU, VTU Belagavi, for information and to make arrangements to upload on the VTU web portal.
4. The Special Officer QPDS section VTU Belagavi for the information and needful (with a copy to Mr.P. Manjunath)
5. All the concerned Special Officer/s and Caseworker/s of the academic section, VTU, Belagavi
6. Office copy.

Note: For each skill lab, the following details shall be furnished.

(A) Details of the institution

(1) Name and address of the institution:

(2) Name of the principal:

(3) Mobile number and email of the principal:

(B) Skill lab details

(a) Title of the skill lab:

(b) Field/ domain of the skill lab:

(c) Objectives and outcomes of the skill lab

Objectives of the Skill Lab	
Title of the skill lab:	
1	
2	
3	
4	
5	

Outcomes of the Skill Lab	
(Practical skills, employability, innovation, industry readiness, and other relevant outcomes, in brief)	
Title of the skill lab:	
1	
2	
3	
4	
5	

(d) Detailed project report (DPR): Attached: YES ☐ No ☐

(e) Is the Skill lab established by the Institution with its own funds: YES ☐ No ☐

(f) If the skill lab is established by an external agency, Name and address of the organisation/
company who has setup the skill lab:

(g) Period of MOU: From: _____ To: _____

(h) Equipped Infrastructure/Facilities: Furnish in brief the details of tools, equipment, software
or technologies used.

(i) Space/Room required in m^2 :

(j) Furniture required:

(k) Estimated cost of the skill lab:

(C) Academic, Training and Operational Details of the Skill Lab

(1) Target branch (s) of the engineering programmes, including MBA, and MCA:

(2) Prerequisite Knowledge/Skills of the students:

(3) Proposed Activities of the Skill Lab: Method of Training/Learning – hands-on, simulation, project-based, industry-oriented, etc.

(4) Faculty/instructor requirement in the skill lab:

(i) The faculty is from the institution or from the organisation or company?

(a) Institution: YES ☐ NO ☐

(b) Organisation or company: YES ☐ NO ☐

(ii) Name, designation and qualification of the faculty /instructors with mobile numbers and email:

(iii) Name and designation of the skill lab coordinator and email:

(iv) Mobile number and email of the coordinator:

(5) Briefly explain the student's assessment/performance evaluation methods:

(6) Skills/Competencies acquirable after the completion of the skill lab:

(7) Expected Expertise/Proficiency at the End of the Skill Lab:

(8) Industry/professional relevance of the expertise/proficiency:

(9) Is admission to skill lab open to all: YES ☐ NO ☐

(10) Session plans with timetable regarding the training: Mention the days and timings.

(D) Maintenance and Sustainability

(Indicate the arrangements made for the maintenance, consumables, utilization, and continued operation of the Skill Lab.)

(E) Declaration

It is proposed to establish the Skill Lab in accordance with the applicable academic and institutional guidelines of VTU. The institution/department undertakes to provide the necessary facilities and ensure effective utilization of the Skill Lab for the benefit of students.

The institution also declares to support students from other colleges, when requested for, without any reservations.

Name and signature of the principal

Name:

Signature:

Date:

Institution seal:

Enclosures:

1. Covering letter from Principal addressed to Registrar.
2. Detailed Project Report (if applicable).
3. Equipment/Tools List with Specifications.
4. Budgetary Quotations/Estimates.
5. Floor Plan/Photographs of Proposed Space,
6. Any Other Supporting Documents.
