# Dayananda Sagar College of Arts, Science, and Commerce

## Internal Quality Assurance Cell

## Department of Computer Applications

## Personal Counselling & Mentoring Cell- Apthamithra

**SEMINAR on The Path of Self Improvement**

**Department:** BCA

**Date of Report:** 8/10/2026

| Sl. No. | Particulars | Event related Details | | | | | |
|---|---|---|---|---|---|---|---|
| 1. | Event | SEMINAR | | | | | |
| 2. | Title of the Event | The Path of Self Improvement | | | | Aligned SDG Goal(s) | 4 |
| 3. | Date of Conduction | 05/10/2026 & 8/10/2026 | 4. | Time | 10AM-11AM | | |
| 5. | Venue | Room No. 205&206 | | | | | |
| 6. | Resource Person 1 Details | Name Ms. Sushma Lingraj<br>Designation<br>Mobile No. | | Organization<br>Specialization<br>Email ID | DSI<br>Counsellor<br>sushmalingraj.chw@dayanandasagar.edu | | |
| 7. | Topics Covered | The Path of Self Improvement | | | | | |
| 8. | Resource Person 2 Details | Name<br>Designation<br>Mobile No. | | Organization<br>Specialization<br>Email ID | | | |
| 9. | Topics Covered | NA | | | | | |
| 10. | No. Faculty Participants | Internal: | 4 | External: | Nil | | |
| 11. | No. Student Participants | Internal: | 93 | External: | Nil | | |
| 12. | Faculty Coordinator/s | Full Name Mrs. Sailaja Bhaskar Murthy<br>Department Department of Computer Applications<br>Designation Asst. Professor | | | | | |
| 13. | Student Coordinator/s | Full Name Lakshit (U03CJ25S0052), Skanda C (U03CJ25S0088)<br>Department<br>Designation | | | | | |
| 14. | Total Expenditure | - | 15 | Sponsors and Amount | NA | | |
| 16. | Agenda of the Event | NA | 17. | Provide the link of the report uploaded on College Website | YES | | |
| 18. | Social Media Links | YES | 19. | Report sent to Newspapers? If yes, provide cuttings/images: | Nil | | |

| Sl. No. | Particulars | Event related Details | | | |
|---|---|---|---|---|---|
| 20. | Certificates Printed? | NA | 21. | Feedback Collected? | YES |
| 22. | Attendance Sheet Attached? | YES | 23 | Photographs of the Event | YES |
| 24. | Summary of the Event | The Department of Computer Applications-BCA in association with Personal Counselling and Mentoring cell – Apthamithra, organized a mentoring seminar on "The Path to Self Improvement" for the III sem students on 5th& 8th October 2026. Ms. Sushma of DSI conducted an insightful mentoring session titled "The Path to Self-Improvement." The session guided student mentees through practical strategies for personal growth, including goal-setting, self-reflection, time management, and cultivating a growth mindset. Through interactive discussions and reflective activities, participants gained valuable tools to identify their strengths, address areas for development, and take ownership of their academic and personal journeys. The session was well-received and reinforced the department's commitment to holistic student development beyond technical skills. | | | |

Internal Quality Assurance Cell Bengaluru 560 111 DAYANAND

Baitya 8/10/26
**Event Coordinator**

13/10/26
**HOD-BCA**

8/10/26
**IQAC Coordinator**

14/10/26
**Principal**

IQAC Co-ordinator
Dayananda Sagar College of Arts, Science & Commerce
Kumaraswamy Layout, Bengaluru - 560 111

Dr. Aruna Devi C MCA., M.Phil., Ph.D
Associate Professor & HOD-BCA
Department of Computer Applications
Dayananda Sagar College of Arts, Science & Commerce
Shavige Malleshwara Hills, Kumaraswamy Layout
Bengaluru - 560 111

Principal
Dayananda Sagar College of Arts
Science & Commerce
Kumaraswamy Layout, Bengaluru - 560 111

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### Glimpses of the Event




**Photo 1:** Introduction to the session.




**Photo 2:** Student participating in the activity.




Photo 3: Team building activity




**Photo 4: Student participating in activity**

**Postal Address:** 1st Stage, Kumaraswamy Layout, Bengaluru, Karnataka 560111
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Kumaraswamy Layout, Bangalore – 560111
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## Internal Quality Assurance Cell

Name of the Activity: **Personal Counselling and Mentoring Cell (Apthamithra)**
**Topic: "The Path of Self Improvement"**
Department: **Department of Computer Applications - BCA**

**Date:08.10.2026** **CLASS : BCA III 'B' SEMESTER** **Time: 10.00 AM To 11.00 AM**

| Sl. No. | Student Name | Reg. No. | Signature |
|---|---|---|---|
| 01 | ~~USN~~ Vasantha K S | U03CJ25S0110 | Vasantha K S |
| 02 | Sanjana . B.N | U03CJ25S0082 | |
| 03 | Yashaswini | U03CJ25S0116 | |
| 04 | Thrishel S.P | U03CJ25S0105 | |
| 05 | RAMYA.B | U03CJ25S0072 | |
| 06 | SAHANA M.G | U03CJ25S0080 | |
| 07 | TUSHAR | U03CJ25S0106 | |
| 08 | Varun kumar BV | U03CJ25S0109 | |
| 09 | Siddharth | U03CJ25S0087 | |
| 10 | Rutuja R Siddappa | U03CJ25S0074 | |
| 11 | SURAJ YADAV | U03CJ25S0101 | |
| 12 | Vedanth.V.A | U03CJ25S0112 | |
| 13 | Skanda.C | U03CJ25S0088 | |
| 14 | Yashas .K | U03CJ25S0115 | |
| 15 | P. Rohit Patil | U03CJ25S0064 | |
| 16 | RIZIL JAPREL | U03CJ25S0075 | |
| 17 | Shivam Debnath | U03CJ25S0085 | |
| 18 | Pavan G | U03CJ25S0065 | |
| 19 | Shubham | U03CJ25S0086 | |
| 20 | Gowtham | U03CJ25S0071 | |
| 21 | Madan | U03CJ25S0063 | |

48 Yavraj U03CJ25S0120

49 Naveen U03CJ25S0061

| Sl. No. | Student Name | Reg. No. | Signature |
|---|---|---|---|
| 22 | Dinesh | U03CJ25S0070 | |
| 23 | Yathish | U03CJ25S0118 | |
| 24 | Akash | U03CJ25S0078 | |
| 25 | Prathik.K.Shetty | U03CJ25S0087 | |
| 26. | Tanish.R | U03CJ25S0104 | |
| 27. | Vinay.R | U03CJ25S0114 | |
| 28 | Rohit.S | U03CJ25S0076 | |
| 29 | Rohith.L | U03CJ25S0077 | |
| 30 | Shahyad | U03CJ25S0155 | |
| 31 | Sripoorna | U03CJ25S0096 | |
| 32 | Vedanth A.M | U03CJ25S0111 | |
| 33 | Sowhardh K.C | U03CJ25S0092 | |
| 34 | Shashwath S.H | U03CJ25S0084 | |
| 35 | Sanath.S | U03CJ25S0081 | |
| 36 | Suraj Yadav | U03CJ25S0101 | |
| 37 | Yuktha.M | U03CJ25S0119 | |
| 38 | Sumana M.P | U03CJ25S0100 | |
| 39 | Spoorthi Sinnur | U03CJ25S0094 | |
| 40 | Ramya M.P | U03CJ25S0073 | |
| 41 | Poorvi H.M | U03CJ25S0066 | |
| 42 | Sana R.S | U03CJ25S0091 | |
| 43 | Vedika N | U03CJ25S0113 | |
| 44. | Pravatika B.M | U03CJ25S0068 | |
| 45. | Soha Ahmed | U03CJ25S0090 | |
| 46 | Suma C.D | U03CJ25S0099 | |
| 47 | Usha.S | U03CJ25S0107 | |
| 48 50 | Sneha.N | U03CJ25S0089 | |

Event Co-ordinator: SAILAJA BHASKAR MURTHY

Signature:

49 51 Spoorthi H.U U03CJ25S0093

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## Internal Quality Assurance Cell

Name of the Activity: **Personal Counselling and Mentoring Cell (Apthamithra)**
**Topic: "The Path of Self Improvement "**
Department: **Department of Computer Applications - BCA**

**Date:05.10.2026** **CLASS : BCA III 'A' SEMESTER** **Time: 10.00 AM To 11.00 AM**

| Sl. No. | Student Name | Reg. No. | Signature |
|---|---|---|---|
| 01 | Chandana.S | U03CJ25S0022 | Chandana |
| 02 | Divya.N | U03CJ25S0030 | Divya.N |
| 03 | Geethanjali.K | U03CJ25S0036 | |
| 04 | Meghana.K | U03CJ25S0056 | |
| 05 | Kusumitha V | U03CJ25S0051 | |
| 06 | Bahulya Raj B.M | U03CJ25S0016 | |
| 07 | Gowthami | U03CJ25S0037 | |
| 08 | Bhoomika Ramesh | U03CJ25S0018 | |
| 09 | Aanya Maheshwari | U03CJ25S0001 | |
| 10 | Bhavana MV | U03CJ25S0017 | |
| 11 | Gangathri.R.S | U03CJ25S0035 | |
| 12 | Jeevitha Sri.S | U03CJ25S0045 | |
| 13 | Durga Spoorthy.P | U03CJ25S0031 | |
| 14 | ~~U03CJ25S00~~ Manvika.BM | U03CJ25S0039 | Manvika |
| 15 | Akshaya.H | U03CJ25S0008 | |
| 16. | Devananda | U03CJ25S0029 | |
| 17 | Bindu | U03CJ25S0019 | |
| 18 | Fazeen | U03CJ25S0032 | |
| 19 | Disha | U03CJ25S0021 | |
| 20 | Aayush Sharma | U03CJ25S0002 | |
| 21. | Amay Kurdekar | U03CJ25S0009 | |

| Sl. No. | Student Name | Reg. No. | Signature |
|---|---|---|---|
| 22 | Charan .N | U03CJ25S0024 | |
| 23 | Ajay Kumar | U03CJ25S0006 | |
| 24 | Chellian .M | U03CJ25S0026 | |
| 25 | Chinmay | U03CJ25S0027 | |
| 26. | Tejvan Raj B | U03CJ25S0044 | |
| 27 | Biraj Kr | U03CJ25S0020 | |
| 28. | Akshat Raj | U03CJ25S0034 | |
| 29. | Indira nandan | U03CJ25S0043 | |
| 30. | Tushar John Samuel | U03CJ25S0047 | |
| 31. | Naga Bhoreshyf K.S | U03CJ25S0060 | |
| 32. | M. Prithvi | U03CJ25S0053 | |
| 33. | Chandrashekar R.K | U03CJ25S0023 | |
| 34. | Abdur Razak Mustafa | U03CJ25S0004 | |
| 35. | Aiman Shoaib | U03CJ25S0005 | |
| 36 | Inderjeet Singh | U03CJ25S0042 | |
| 37 | Devadath. P | U03CJ25S0028 | |
| 38 | AJAY SM | U03CJ25S0007 | |
| 39 | Amit R | U03CJ25S0010 | |
| 40 | MOHAN.S | U03CJ25S0059 | |
| 41 | M. JAISHANKAR | U03CJ25S0054 | |
| 42 | Mohammed Rehaan Khan | U03CJ25S0058 | Rehaan |
| 43 | A. KSHIT | U03CJ25S0052 | |
| 44 | Himanshu Pojha | U03CJ25S0071 | |
| | | | |
| | | | |
| | | | |

Event Co-ordinator: SAILAJA BHASKAR MURTHY

Signature: Sailaja 8/10/20

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## Internal Quality Assurance Cell

### STUDENT FEEDBACK FORM

**Name of the Student:** Chandana.S **UUCMS No.** U03CJ25S0022

**Courese:** BCA **Sem:** III **Section:** A

**Name of Activity:** SELE IMPROVEMENT

**Organized by:** SUSHMA **Date:** 05/09/2020

**Resource Person:** SUSHMA **Programme/Class:** III SEM BCA

**Rating Scale: 5 – Excellent | 4 – Very Good | 3 – Good | 2 – Satisfactory | 1 – Needs Improvement**

| No. | Feedback Parameter | 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|---|
| 1 | Relevance of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 2 | Quality and clarity of content delivered | ☑ | ☐ | ☐ | ☐ | ☐ |
| 3 | Effectiveness of the resource person/facilitator | ☑ | ☐ | ☐ | ☐ | ☐ |
| 4 | Interaction and student participation | ☑ | ☐ | ☐ | ☐ | ☐ |
| 5 | Achievement of the intended learning outcomes | ☑ | ☐ | ☐ | ☐ | ☐ |
| 6 | Improvement in my knowledge/skills through the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 7 | Ability to apply the learning gained | ☑ | ☐ | ☐ | ☐ | ☐ |
| 8 | Organization and coordination of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 9 | Overall satisfaction with the activity | ☑ | ☐ | ☐ | ☐ | ☐ |

Internal Quality Assurance Cell Bengaluru DSCASC

**Learning Outcome / Student Response**

**Important learning/skill gained from this activity:**

SELF IMPROVEMENT, MIND SOUL BODY

**Suggestion for improvement / future activity:**

We are looking more session based on self Awareness

**Would you recommend similar activities in future?** ☑ Yes ☐ No

**Overall Rating:** ☑ Excellent ☐ Very Good ☐ Good ☐ Satisfactory ☐ Needs Improvement

**Signature of the Student:**

Chandana

**Postal Address:** 1st Stage, Kumaraswamy Layout, Bengaluru, Karnataka 560111
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## Internal Quality Assurance Cell

### STUDENT FEEDBACK FORM

**Name of the Student:** Chandrashekar **UUCMS No.** U03CJ25S0023

**Courese:** BCA **Sem:** III **Section:** A

**Name of Activity:** Self Improvement

**Organized by:** Shushma Lingraj **Date:** 05.10.26

**Resource Person:** Shushma Lingraj **Programme/Class:** _____

**Rating Scale: 5 – Excellent | 4 – Very Good | 3 – Good | 2 – Satisfactory | 1 – Needs Improvement**

| No. | Feedback Parameter | 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|---|
| 1 | Relevance of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 2 | Quality and clarity of content delivered | ☑ | ☐ | ☐ | ☐ | ☐ |
| 3 | Effectiveness of the resource person/facilitator | ☑ | ☐ | ☐ | ☐ | ☐ |
| 4 | Interaction and student participation | ☑ | ☐ | ☐ | ☐ | ☐ |
| 5 | Achievement of the intended learning outcomes | ☑ | ☐ | ☐ | ☐ | ☐ |
| 6 | Improvement in my knowledge/skills through the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 7 | Ability to apply the learning gained | ☑ | ☐ | ☐ | ☐ | ☐ |
| 8 | Organization and coordination of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 9 | Overall satisfaction with the activity | ☑ | ☐ | ☐ | ☐ | ☐ |

Internal Quality Assurance Cell Bengaluru 560 111 DSCASC

**Learning Outcome / Student Response**

**Important learning/skill gained from this activity:**
Self Improvement

**Suggestion for improvement / future activity:**
No improvement needed

**Would you recommend similar activities in future?** ☑ Yes ☐ No

**Overall Rating:** ☑ Excellent ☐ Very Good ☐ Good ☐ Satisfactory ☐ Needs Improvement

**Signature of the Student:**

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**Website:** www.dscasc.edu.in

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### STUDENT FEEDBACK FORM

**Name of the Student:** Dinesh Rao **UUCMS No.** U03CJ25S0070

**Course:** BCA **Sem:** III **Section:** B

**Name of Activity:** The path of Self improvement

**Organized by:** _____ **Date:** 8/10/26.

**Resource Person:** _____ **Programme/Class:** _____

**Rating Scale: 5 – Excellent | 4 – Very Good | 3 – Good | 2 – Satisfactory | 1 – Needs Improvement**

| No. | Feedback Parameter | 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|---|
| 1 | Relevance of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 2 | Quality and clarity of content delivered | ☑ | ☐ | ☐ | ☐ | ☐ |
| 3 | Effectiveness of the resource person/facilitator | ☐ | ☑ | ☐ | ☐ | ☐ |
| 4 | Interaction and student participation | ☑ | ☐ | ☐ | ☐ | ☐ |
| 5 | Achievement of the intended learning outcomes | ☐ | ☑ | ☐ | ☐ | ☐ |
| 6 | Improvement in my knowledge/skills through the activity | ☐ | ☑ | ☐ | ☐ | ☐ |
| 7 | Ability to apply the learning gained | ☐ | ☑ | ☐ | ☐ | ☐ |
| 8 | Organization and coordination of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 9 | Overall satisfaction with the activity | ☑ | ☐ | ☐ | ☐ | ☐ |

**Learning Outcome / Student Response**

**Important learning/skill gained from this activity:**

Self - Improvement

**Suggestion for improvement / future activity:**

—

**Would you recommend similar activities in future?** ☑ Yes ☐ No

**Overall Rating:** ☑ Excellent ☐ Very Good ☐ Good ☐ Satisfactory ☐ Needs Improvement

**Signature of the Student:**

Dinesh. Rao

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**Ph:** 080-42161767 **Email ID:** principal-dscasc@dayanandasagar.edu
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### STUDENT FEEDBACK FORM

**Name of the Student:** Shubham **UUCMS No.** U03CJ25S0086

**Course:** BCA **Sem:** III **Section:** B

**Name of Activity:** The path of Self Improvement

**Organized by:** _____ **Date:** 8/10/26.

**Resource Person:** _____ **Programme/Class:** _____

**Rating Scale: 5 – Excellent | 4 – Very Good | 3 – Good | 2 – Satisfactory | 1 – Needs Improvement**

| No. | Feedback Parameter | 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|---|
| 1 | Relevance of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 2 | Quality and clarity of content delivered | ☑ | ☐ | ☐ | ☐ | ☐ |
| 3 | Effectiveness of the resource person/facilitator | ☑ | ☐ | ☐ | ☐ | ☐ |
| 4 | Interaction and student participation | ☑ | ☐ | ☐ | ☐ | ☐ |
| 5 | Achievement of the intended learning outcomes | ☑ | ☐ | ☐ | ☐ | ☐ |
| 6 | Improvement in my knowledge/skills through the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 7 | Ability to apply the learning gained | ☑ | ☐ | ☐ | ☐ | ☐ |
| 8 | Organization and coordination of the activity | ☑ | ☐ | ☐ | ☐ | ☐ |
| 9 | Overall satisfaction with the activity | ☑ | ☐ | ☐ | ☐ | ☐ |

**Learning Outcome / Student Response**

**Important learning/skill gained from this activity:**

Self awareness

**Suggestion for improvement / future activity:**

—

**Would you recommend similar activities in future?** ☐ Yes ☐ No

**Overall Rating:** ☑ Excellent ☐ Very Good ☐ Good ☐ Satisfactory ☐ Needs Improvement

**Signature of the Student:**

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