



UNIVERSITY OF HEALTH SCIENCES, LAHORE

PERFORMA FOR REASECH QUALITY AND QUANTUM ANALYSIS

PERSONAL INFORMATION										
1.	<i>Name od Department</i>									
2.	<i>Institute Name</i>									
3.	<i>Date of Assessment (Period)</i>									
DETAILS OF RESEARCH										
4.	Research Publication Status			Category (HEC HJRS)			Impact Factor	H-Index	Citations	
	<i>Published</i>	<i>Accepted</i>	<i>Submitted</i>	<i>PMDC Approved</i>	X	Y	W			
5.	<i>Commercialised research products (patent applications, clinical trials, trade-marks).</i>									
6.	<i>Any development of new business spin-outs, start-ups, new tools and technologies.</i>									
7.	<i>Any additional joint research projects undertaken at foreign lab / university.</i>									
8.	<i>Did department establish any research collaboration? Give details.</i>									
9.	<i>Did department receive any foreign financial support for the research period or extended period?</i>									
10.	<i>No. of workshops / conferences / seminars / trainings organized by department.</i>									
11.	<i>Did any faculty member participate in any workshops / conferences / seminars / trainings?</i>							Yes	No	
	<i>If yes, did you attend it as a:</i>							Participant	Presenter	
COMMENTS AND SUGGESTIONS										
<i>Signatures (Principal / Head of Institution): _____ Dated: _____</i>										