



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
Sector-16 C, Dwarka, New Delhi-110078

ACADEMIC COORDINATION BRANCH

F.No.IPU/JR(Acad Coord)/2013-14/ 445

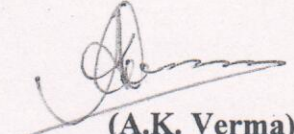
Dated: 14/8/2013

Sub: Form for Student I-Card and Form for Security Refund for Students of USS

Reference above subject, a circular was sent vide F.No.IPU/JR(Acad Coord)/2013-14/388 dated 28.06.2013 regarding form to be used for security refund. The same is also uploaded on University website on 28.06.2013.

The form for issue of Student Identity Card, as per approved Standard Operating Procedure (SOP)-duly approved by Hon'ble Vice Chancellor, has also been uploaded on University website dated 05.08.2013.

All concerned are requested to kindly use these forms for processing of cases.


(A.K. Verma)
Jt. Registrar (Acad Coord)

Copy to:

1. Dean USBT
2. Dean USICT
3. Dean USLLS
4. Dean USMS
5. Dean USBAS
6. Prof. In-Charge USAP
7. Dean USEM
8. Dean USHSS
9. Dean USCT
10. Dean USE
11. Dean USMC
12. Dean USET
13. Dean USMPHS
14. Chairman UCITIM (with request to upload the same on University website)
15. AR to Hon'ble VC
16. AR to Registrar
17. Office Copy
18. Guard File



Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078
Academic Coordination Branch

FORM FOR ISSUE OF STUDENT IDENTITY CARD

(Important : see notes below)

Name _____
(Block letters)
Father/Husband's Name _____
(Block letters)
Mother's Name _____
(Block letters)
School and Course _____
Enrolment No _____
Semester _____
(Give year, if annual pattern)
Type of Course (Regular/Weekend) _____
Date of Birth _____
(DD/MM/YYYY)
Blood Group _____
Name of Person & Phone No. to be
contacted in case of emergency _____
Mark of Identification _____
Residential Address _____

Paste here recent
passport size photograph
(to be scanned for I.D
Card)

Paste here recent
passport size photograph
(same as above duly
attested by Dean)

Phone No _____ Mobile _____ Res: _____
Valid upto _____ 31st July _____ (Year)
(for regular duration of course)

UNDERTAKING

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any Information. I realise that if any information furnished here is found to be incorrect / untrue, I shall be liable to action by the University. I agree to abide by the rules and regulation of University. I understand that, if I am found indulging in any act of misbehavior / indiscipline, disciplinary action will be taken against me.

Counter signature of Dean/Nominee
(with date and Seal)

Signature of Student
(with date)

Notes: -

1. Filled- in form is to be submitted at the office of respective Dean.
2. The form must be duly signed and stamped by the respective Dean/ Nominee at the space given above.
(The form will not be accepted without the signature and stamp of Dean/ Nominee).
3. The Form must be filled up in legible handwriting as per instructions above.
4. All the Columns are compulsory.



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
Sector-16 C, Dwarka, New Delhi-110078

OFFICE OF DEAN

University School of _____

Find enclosed the NOC application forms along with original I- Cards of the students of our schools as per details below for refund of Security deposit:

S.No.	Name of the Student	Enrolment No.	Course Passed	Amount to be refunded (as per NOC form)	Contact No. (as per NOC form)	E-Refund Details: Bank A/c No.; Name of Bank with Address; MICR Code; IFS Code (as per NOC form)
1	2	3	4	5	6	7



Dated: _____

(Signature)
(Dean of School / Nominee)
(give name also in case of Nominee)

Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi-110078

(UNIVERSITY SCHOOL OF _____)

NO DUES CERTIFICATE

(For refund of security amount deposited at the time of Admission)
(Filling all columns is necessary)

1. Name of the Student (*in Capitals*) : _____
2. Father's Name : _____
3. Mother's Name : _____
4. Name of the Programme : _____
5. Enrollment No. : _____
6. Correspondence Address : _____
7. Security Amount Deposited (Rs.)
(*at the time of admission*) : _____
8. Telephone / Cell No. : _____
9. Email Address : _____
10. Year of Passing : _____
11. Result (Passed / Awaited) : _____
12. E-Refund Details :
 - a) Complete Bank Account No
(A photocopy of cheque be enclosed) : _____
 - b) Name of Bank with Address : _____
 - c) MICR Code : _____
 - d) IFS Code : _____

UNDERTAKING

I declare that information given above is correct to the best of my knowledge and belief. The security deposit may be refunded to me **after deducting dues**, (if any) as indicated below:
My original Identity Card is enclosed.

Dated : _____

(Student's Signature)

No Dues / Dues (if any, may please be specified)

Dean / Nominee

Proctor

Director, Students' Welfare

Librarian

Hostel Warden (Boys/Girls)

Net Amount to be refunded:

(As per above Undertaking) Rs. _____
(To be filled up by student before submitting to Dean's Office)

To be submitted to:
Dean of the School.