

Guru Gobind Singh College for Women
Sector-26, Chandigarh
Session 2018-19

Form No.

UNDERTAKING

I _____ Seeking admission to _____
_____ have gone through the prospectus of the College / Hostel and I hereby submit I am aware of the following rules and regulations of the college that.

- It is Compulsory to have a minimum of 75% attendance.
- It is Compulsory for all students to take the mid semester house exam.
- If a student remains absent from college for more than seven days, the college must be informed.
- No lecture will be given for medical leave or any other leave. The leave will only prevent the students name from being struck off from the college rolls.
- In case the requirements for minimum attendance and house exams is not fulfilled the student will not be permitted to sit for the final exam.
- The use of mobile phones in the restricted area of the college will result in strict disciplinary action which may then extended to expulsion from the college.
- Ragging in an offence punishable by law. Any student found including in ragging will be expelled from the College.
- Fees and dues of the college must be paid according to the schedule notified by the college.
- Student herself is responsible to read the notice board everyday, to stay informed of important information.
- Any change of address or phone no's must be informed to the college authorities.
- Any kind of indiscipline, use of abusive language, misbehavior, disobedience or any of physical violence will be penalized. No outsider can intervene on behalf of the erring student and such a violation can lead to expulsion.
- The college bears no responsibility for any loss or damage to valuables possessed by student including cash, mobile phone, Jewellery or personal belongings.
- Sitting upon or tampering with staff vehicles will invite strict punishment.
- The College bears no responsibility for any loss or damage to the student's vehicles or its parts/ accessories.
- Identity cards must always be carried by the student on the college campus and must be produced when required by any faculty member, security and staff.
- Joining any Job/ Service is not allowed for College Students. Any Student found working during her stay in College will be expelled from College.

Full Signature of the Student

Address

.....

.....

Ph. No. (Resi)

Mobile

STATEMENT BY PARENTS/ GUARDIAN

We hereby affirm that we have read the rules and regulations of the college/ hostel and promise to abide by them.

We assure that who is seeking admission in class
has signed the undertaking in our presence and will conform to the above stated standards in conduct and academics.

Signature : Mother

Signature : Father/ Guardian

Name (in capitals)

Name (in capitals)

Date

Date

Mobile

Mobile

GENERAL TUTORIAL GROUP (PROFORMA)

(To be filled by the student)

Name :

Class :

Roll No. :

Date of Birth :

Name of the Tutor :

Marks obtained in preceding class :

Father's Name :

Local Address :

Permanent Address :

Contact Number :

Hobbies :

Games :

Extra Curricular Activities :

Aim in Life :

Reasons for Joining GGSCW College :

Signature :

GGSCW

Guru Gobind Singh College for Women

Sector 26, Chandigarh

Library Membership Form

(Fill the Form in Capital Letters)

Session 2018-19

Class

Roll No

Name

Father's Name

D.O.B.

Fee Receipt No. Date / /

Correspondence Address

.....

.....

.....

Ph Ph

Stamp Size
Photograph

Stamp Size
Photograph

For Old Students

Particulars of Previous Studies

Year Class Roll No.

Year Class Roll No.

I agree to abide by the library rules.

G G S C W

Student's Signature



ELECTION COMMISSION OF INDIA

FORM-6

(See Rules 13(1) and 26) of Registration of Electors Rule-1960

Acknowledgement No.
(To be filled by office)

Application for Inclusion of Name in Electoral Roll for First time Voter OR on Shifting from One Constituency to Another Constituency.

To, The Electoral Registration Officer, Assembly / Parliamentary Constituency			SPACE FOR PASTING ONE RECENT PASSPORT SIZE PHOTOGRAPH (3.5 CM X 3.5 CM) SHOWING FRONTAL VIEW OF FULL FACE WITHIN THIS BOX
I request that my name be included in the electoral for the above Constituency. (Tick appropriate box) As a first time voter <input type="checkbox"/> or due to shifting from another constituency <input type="checkbox"/>			
Particulars in support of my claim for inclusion in the electoral roll are given below:-			
Mandatory Particulars			
(a) Name			
(b) Surname (if any)			
(c) Name and surname of Relative of Applicant [see item (d)]			
(d) Type of Relation (Tick appropriate box)	Father <input type="checkbox"/> Mother <input type="checkbox"/> Husband <input type="checkbox"/> Wife <input type="checkbox"/> Other <input type="checkbox"/>		
(e) Age [as on 1 st January of current calendar year]	Years <input type="checkbox"/> <input type="checkbox"/>	Months <input type="checkbox"/> <input type="checkbox"/>	
(f) Date of Birth (in DD/MM/YYYY format) (if known)	<input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
(g) Gender of Applicant (Tick appropriate box)	Male <input type="checkbox"/> Female <input type="checkbox"/> Third Gender <input type="checkbox"/>		
(h) Current address where applicant is ordinarily resident	House No.		
Street / Area / Locality			
Town / Village			
Post Office		Pin Code <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
District		State/UT	
(i) Permanent address of applicant	House No.		
Street / Area / Locality			
Town / Village			
Post Office		Pin Code <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
District		State/UT	
(j) EPIC No. (if issued)			
Optional Particulars			
(k) Disability (if any) (Tick appropriate box)	Visual impairment <input type="checkbox"/> Speech & hearing disability <input type="checkbox"/> Locomotor disability <input type="checkbox"/> Other		
(l) Email id (optional)			
(m) Mobile No. (optional)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
DECLARATION - I hereby declare that to the best of knowledge and belief—			
(i) I am a citizen of India and place of my birth is Village/Town District State			
(ii) I am ordinarily resident at the address given at (h) above since (date, month, year).			
(iii) I have not applied for the inclusion of my name in the electoral roll for any other constituency.			
*(iv) My name has not already been included in the electoral roll for this or any other assembly/ parliamentary constituency			
OR			
*My name may have been included in the electoral roll for Constituency in			
State in which I was ordinarily resident earlier at the address mentioned below and if so, I request that the same may be deleted from that electoral roll.			
* strike off the option not appropriate			

Address of earlier place of ordinary residence (if applying due to shifting from another constituency)			
House No.		Street/ Area/ Locality	
Town/ Village			
Post Office			Pin Code
District		State/ UT	
<p>I am aware that making a statement or declaration which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of the representation of the People Act, 1950 (43 of 1950)</p> <p>Place</p> <p>Date Signature of Applicant</p>			
Remarks of Field Level Verifying Officer:			
Details of action taken (To be filled by Electoral Registration Officer of the constituency)			
<p>The application of Shri / Shrimati/ Kumari for inclusion of name in the electoral roll in Form 6 has been accepted/ rejected. Detailed reasons for acceptance [under or in pursuance of rule 18/20/26(4)] or rejection [under or in pursuance of rule 17/20/26(4)] are given below:</p> <p>Place:</p> <p>Date: Signature of ERO Seal of the ERO</p>			
<p>Intimation of decision taken (to be filled by Electoral Registration Officer of the constituency and to be posted to the applicant on the address as given by the applicant)</p>			
The application in form 6 of Shri/Shrimati/Kumari.....			Postage Stamp to be affixed by the Electoral Registration Authority at the time of dispatch
Current address where applicant is ordinarily resident		House No.	
Street/ Area/ Locality			
Town/ Village			
Post Office		Pin Code	
District		State/ UT	
<p>Has been (a) accepted and the name of Shri/ Shrimati/ Kumari</p> <p>Has been registered at Serial No. In Part No of AC No</p> <p>(b) rejected for the reason</p> <p>Date : Electoral Registration Officer</p> <p style="text-align:right;">Address</p>			
<u>Acknowledgement/ Receipt</u>			
Acknowledgement Number		Date	
Received the application in form 6 of Shri / Smt. / Ms.			
[Applicant can refer the Acknowledgement No. to check the status of application].			
Name / Signature of ERO/ AERO/ BLO			

ANNEXURE I
AFFIDAVIT BY THE STUDENT

I, _____ (full name of student with admission/ registration/ enrolment Number) S/o D/o Mr./ Mrs./Ms. _____, having been admitted to _____ (name of the institution), have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name: _____

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) _____ (year).

Signature of deponent

Solemnly affirmed and signed in my presence on this the _____(day) of _____(month) _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER

ANNEXURE II
AFFIDAVIT BY PARENT/GUARDIAN

I, Mr./Mrs./Ms. _____ (full name of parent/guardian) father/ mother/ guardian of, (full name of student with University Roll Number), having been admitted to _____ (name of the institution), have received or downloaded a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations"), carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.

6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name:

Address:

Telephone/ Mobile No.:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____ (place) on this the _____ (day) of _____ (month) _____ (year).

Signature of deponent

Solemnly affirmed and signed in my presence on this the _____(day) of _____(month) _____ (year) after reading the contents of this affidavit.

OATH COMMISSIONER