



CENTRE FOR DISASTER MANAGEMENT STUDIES
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
SECTOR 16 C, DWARKA, NEW DELHI-110078

GGSIU/CDMS/2020/4530/

Date : 22.10.2020

NOTIFICATION

Schedule for Online Interview and Document Verification of Candidates applied for MBA (DISASTER MANAGEMENT) WEEKEND PROGRAMME for Session 2020-21

TEST CODE - 186

**Venue of Counselling : - Centre for Disaster Management Studies,
Room No. 106, 107, E- Block,
Guru Gobind Singh Indraprastha University,
Sector- 16 C, Dwarka, New Delhi -110078**

Dates	Time	S. No. of Candidates
27/10/2020	10.00 AM onwards	37 onwards*

* Any candidate from S. No. 1-36 (list enclosed), if interested for admission and was not able to appear for interview held earlier, may also submit his/ her request to Director, CDMS on email/mobile for appearing in online interview on 27/10/2020.

Scanned documents required for Verification, to be submitted online at email given below (Original may be shown at the time of counseling):-

1. Admission Verification Form (Format attached)
2. Provisional Certificate/ Degree/ Marksheet
3. NOC from present employer and Professional Experience Certificate

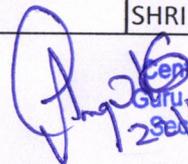
4. Reservation Certificate

- A. The Reserve Category (SC/ ST) candidates has to bring SC/ ST certificate issued from respective State/ Region to claim seat and for relaxation of marks in the qualifying examination, if any, as per reservation policy of the University;
- B. The provision for reservation in OBC category is not applicable for Post Graduation/ Master Level Programmes. However, the OBC category candidates may claim seat in General Category, as per their respective regions.
- C. For clarification on reservation policy, candidates may please refer in the Chapter VI: Reservation Policy respective of Part A, Admission Brochure 2020-21.


Director CDMS
Centre for Disaster Management Studies
Guru Gobind Singh Indraprastha University
Sector-16C, Dwarka, New Delhi-110078

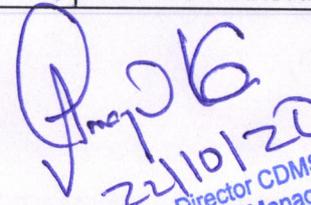
MBA (Disaster Management) 2020-21

S. No.	Application Seq No	Applicant Name	Fathers Name	Category	Region
1	IPU000548	ROHIT KHANNA	SANDEEP KHANNA	UR	Outside Delhi
2	IPU001391	HEMANT KUMAR	SURESH	OBC(NCL)	Delhi
3	IPU003726	ASHOK KUMAR MEENA	MANOHAR LAL MEENA	ST	Outside Delhi
4	IPU007185	SHIVANI BINDAL	MAJ GEN MK BINDAL	UR	Delhi
5	IPU022087	MAHAK SWAMI	RAJAN SWAMI	UR	Delhi
6	IPU027310	SUBODH KUMAR GUPTA	VINOD PRAKASH GUPTA	UR	Delhi
7	IPU029978	BASANTA KUMAR BEHERA	GUNDICHA BEHERA	SC	Outside Delhi
8	IPU030324	ASHISH KUMAR ANMOL	LATE.BINDESHWARI PRASAD SINGH	UR	Outside Delhi
9	IPU046605	VISHAL HARIT	RAJ KISHAN	UR	Outside Delhi
10	IPU074643	ADARSH KUMAR	SATYA PAL SINGH	UR	Outside Delhi
11	IPU080967	DAISY SINGH	MADAN PAL MUNDEY	SC	Outside Delhi
12	IPU097501	SREENU MONDI	SOMA SEKHARAM	OBC(NCL)	Outside Delhi
13	IPU110554	PARVEEN KUMAR	RAMBHAJ	SC	Outside Delhi
14	IPU122682	MAMTA SHARMA	RAJENDER SHARMA	UR	Delhi
15	IPU129804	PRIYANKA ANAND	VIJAY KUMAR ANAND	UR	Outside Delhi
16	IPU130767	GOPAL SHARMA	RAJPAL SHARMA	UR	Outside Delhi
17	IPU136498	SUDHAKAR LAL	BIHARI LAL	SC	Delhi
18	IPU139769	RAVINESH KUMAR	PRASADI SINGH	UR	Delhi
19	IPU147576	ADURVRAT BASATTA	SHEEL KUMAR	OBC(NCL)	Delhi
20	IPU148246	ARUN KUMAR TIWARI	RAGHO TIWARI	UR	Delhi
21	IPU163514	SIDHARATHA SINGH	SHRI I S JANGHU	UR	Outside Delhi
22	IPU166303	DHRUV KUMAR NISHAD	MURLI NISHAD	UR	Outside Delhi
23	IPU168591	HEMANT SHARMA	ASHWANI SHARMA	UR	Delhi
24	IPU169380	MOHD SALMAN KHAN	BARKAT ZAMAN KHAN	UR	Outside Delhi
25	IPU181651	ANGELA PURI	ANIL PURI	UR	Delhi
26	IPU184338	ANKIT DAHIYA	RAJ KUMAR DAHIYA	UR	Outside Delhi
27	IPU186919	SUNNY GAUR	RAMNIWAS	UR	Outside Delhi
28	IPU190566	SANDEEP	RAMESH CHANDER	UR	Delhi
29	IPU194284	VARUN BHARDWAJ	VIJAY PAL BHARDWAJ	UR	Outside Delhi
30	IPU196744	KAUSHAL KISHORE	SHRI DANI RAM	SC	Outside Delhi



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31	IPU198130	RAVINDER SINGH	GANGASAHU	UR	Outside Delhi
32	IPU210871	GULSHAN KUMAR	NAND LAL	UR	Delhi
33	IPU211698	PRANJAL SRIVASTAVA	ASHOK KUMAR SRIVASTAVA	UR	Outside Delhi
34	IPU212106	SACHITA RATHORE	UMESH CHANRA	UR	Delhi
35	IPU220460	VISHAL GUPTA	ADESH KUMAR GUPTA	UR	Delhi
36	IPU236851	PARDEEP KUMAR	SH. BALWAN SINGH	UR	Outside Delhi
37	IPU253724	NARENDRA KOTWAL	JIA LAL KOTWAL	UR	Outside Delhi
38	IPU253766	MOHAMMED ATIQUE WARSI	MOHAMMED WAZAIR	UR	Outside Delhi
39	IPU253819	RAKSHIT GARG	PRAVEEN GARG	UR	Delhi
40	IPU253829	MANISH KHATANA	BIR SINGH KHATANA	OBC(NCL)	Outside Delhi
41	IPU253840	BIPIN KUMAR	VED PRAKASH	SC	Outside Delhi
42	IPU253843	ARSHAD UMAR	USMAN UMAR	UR	Outside Delhi
43	IPU253859	BHUPENDRA NAUTIYAL	SHRI L.R.NAUTIYAL	UR	Delhi
44	IPU253881	KARAN MENGI	RAM SAROOP MENGI	UR	Outside Delhi
45	IPU253884	SUCHITA BAHL	SURENDER TANDAN	UR	Outside Delhi


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5. **Medical Certificate:** Certificate of medical fitness, signed by a Registered Medical Practitioner holding a medical degree in the format as given in Appendix – 6 (Original) of Admission Brochure Part B – 2020-21 (attached).

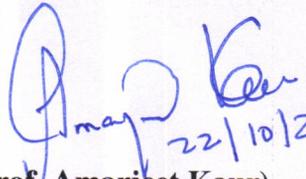
Note:

For seeking admission in MBA (Disaster Management) Weekend programme, eligibility criteria mentioned in Admission Brochure 2020-21 should be referred.

For any query, please contact, Office of Director CDMS, GGSIPU

Contact Number: 011-25302782-83 (Office), +91-9810479919 (Mobile)

Email: director.cdms@ipu.ac.in, amarjeet_ip@yahoo.com


22/10/20
(Prof. Amarjeet Kaur)
Director CDMS
Director CDMS
Centre for Disaster Management Studies
Guru Gobind Singh Indraprastha University
Sector-16C, Dwarka, New Delhi-110078



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

Photograph
duly attested by
the officer who
has certified
this certificate

MEDICAL CERTIFICATE**
(FOR THE ACADEMIC SESSION 2020-21)
(TO BE SUBMITTED AT THE TIME OF COUNSELLING/ADMISSION)

I certify that I have carefully examined Shri/Km/Smt.* _____
son/ daughter/wife of Shri/Smt.* _____ whose
signature is given below. Based on the examination, I certify that he/she is in good mental and physical
health and is free from any physical defects which may interfere with his/her studies including the active
outdoor duties required of a professional. Visible Mark of Identification

Signature of the Candidate _____

Place :

Date :

Name & Signature of the
Medical Officer with Seal and
Registration Number

* Strike whichever is not applicable.

** To be signed by a Registered Medical Practitioner holding a Medical degree.

Note : Use photocopy of this Form



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

Appendix 4(A)

Photograph
duly attested by
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has certified
this certificate

**ADMISSION VERIFICATION FORM FOR THE
ACADEMIC SESSION 2020-21
(FOR ENGINEERING, B. ARCH & PROFESSIONAL PROGRAMMES)**

Name of Candidate: (Mr/Miss/Mrs) _____
Address: _____
PIN Code _____ Tele. No. (with STD code) _____ Mobile No. _____
Email: _____
Minority Community (If applicable) _____ (Sikh / Muslim / Jain / Christian) CET Roll No. _____
Category (SC / ST / OBC / Def / PH / Kashmiri Migrant) _____ CET Rank _____

1. School / College location of qualifying examination _____ (Delhi / Outside Delhi)
2. Date of Birth _____ Age as on 1-8-2020: years _____ months _____ days _____
(As per Secondary School Certificate)
3. Passed Senior Secondary Examination / Three year Diploma in Engg/B Sc Graduation (3 yrs) _____
4. Aggregate percentage of all subjects in Sr. Secondary Examination/Dip. in Engg/ B Sc Graduation (3 yrs) _____
5. Passed in English in 12th Class _____
6. PCM/PCBM Percentage in 12th Class _____
7. Percentage in qualifying degree as per the eligibility condition specified in PART A of the Admission Brochure: _____

8. Passed in Maths / Computer Science / Computer Applications in 12th Class _____
9. Category Certificate SC / ST / OBC / PH / Defence / Kashmiri Migrants / Minority Community (Attach photocopy) :
10. Character Certificate (Attach photocopy) _____
11. Medical Certificate (Attach Original) _____
12. Passed Graduation in the year _____ Percentage of marks in graduation _____
13. Passed Post-Graduation in the year _____ Percentage of marks in post-graduation _____
14. (a) NATA/GATE Score _____
(b) Year of Passing _____
15. Details of Demand Draft(s) for Submission of fees
Amt: _____ DD No. _____ Bank/Branch _____
Amt: _____ DD No. _____ Bank/Branch _____
Amt: _____ DD No. _____ Bank/Branch _____

I solemnly affirm that the information furnished above is true and correct in all respects. I have not concealed any information. I realize that if any information furnished herein is found to be incorrect or untrue, I shall be liable to criminal prosecution and also forgo my claim to the seat in the college. Further, that my candidature for examination/selection and admission to the course is liable to be cancelled. I agree to abide by the rules & regulations of the University.

Signature of the Parent/Guardian & Date _____

Signature of Candidate & Date _____

FOR OFFICE USE ONLY

Certificates Checked and Verified by University official/Officer during counselling:
Signature of the Deputed Officers/Officials _____

Name of the Officer/Officials _____

University Enrolment No. _____