



NATIONAL SERVICE SCHEME (NSS) CELL
Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, New Delhi – 110078
Ph. No.011-25302703, Email Id: nsscell@ipu.ac.in



F. No. GGSIPU/NSSCELL/2021/0466
Dated: 20th September, 2022

NOTICE

Sub: Selection of NSS Volunteers at University level for North Zone Pre-Republic Day Camp-2022.

We are happy to announce NSS Cell, GGSIPU is organising One Day Camp for selection of NSS Volunteers at University level for **North Zone Pre-Republic Day Camp-2022**. This is with reference to the letter received from the Office of the Regional Directorate of NSS, Ministry of Youth Affairs and Sport through email dated: 17.09.2021.

All the program officers of USS and Affiliated Colleges are advised to shortlist the suitable and eligible NSS Volunteers (**02 Male and 02 Female**) as given in the enclosed letter at University School/ College level. The shortlisted **02 male and 02 female Volunteers** will have to report for University level selections of shortlisting on **25.09.2022 (Sunday) at 9:00 am at Main Football Ground, GGSIP University, Sector-16C, Dwarka, New Delhi-110078**.

Please send the complete details of shortlisted NSS Volunteers alongwith name of Program Officers as per provided prescribed format (in excel format) through email to the undersigned on/before **23rd September, 2022 (05:00 PM)**. GGSIPU NSS Cell will shortlist volunteers based on the criteria given in the attached letter received from NSSRC.

All the Directors/Principals and Program officers of NSS are requested to complete the process and be a part of Pre-Republic Day Celebrations 2022 and Republic Day Celebrations 2023.


(Prof. Varun Joshi)

Program Coordinator, GGSIPU NSS Cell

Copy to:

1. Hon'ble Vice Chancellor, GGSIPU (for kind information please) (Through Email)
2. Registrar, GGSIPU (for kind information please) (Through Email)
3. All Deans/Directors/Principal (USS & its Affiliated Colleges) (Through Email)
4. **Capt. (Dr.) Anitha G.**, ANO, 4DGBN, GGSIPU (**Special Invitees**) (Through Email) (To do the selections and select the suitable NSS Volunteer for State/UT Level Pre-RDC-2022)
5. **Lt. (Dr.) Suhail Ahtesham**, ANO, 2DAB, GGSIPU (**Special Invitees**) (Through Email) (To do the selection and select the suitable NSS Volunteer for State/UT Level Pre-RDC-2022)
6. **All NSS Program Officers** (USS & its Affiliated Colleges) (Through Email)
7. Head UITS, request to upload on the University website.
8. Guard File

Pre-Republic Day Parade Camp 2022

Photo

CHEST NO. _____

(NOMINATION FORM)

A. PERSONAL DETAILS : (in capital letters)

- (i) Name : Mr./Miss _____
(ii) Date of Birth: _____
(iii) Father's Name: _____
(iv) Mother's Name : _____
(v) Educational Qualification: _____
(vi) Name of University: _____
(vii) Name of College/Institute: _____

B. CONTACT DETAILS

Permanent Address:

Mobile No(s):

E mail ID:

C. NSS UNIT DETAILS

- | | |
|---|---|
| (i) Name & Address of Programme Officer | (i) Name & Address of Programme Coordinator |
| Mobile No(s):
E mail ID: | Mobile No(s):
E mail ID: |

D. OTHER DETAILS

- | | |
|--|---------------------------------|
| (i) Height (in cm) _____ | (ii) Weight (Kg.) _____ |
| (iii) Food habit: <u>veg/non-veg</u> _____ | (iv) Blood Group: _____ |
| (v) NSS Camps attended: _____ | (vi) NSS Enrollment year: _____ |
| | (viii) Hobbies: _____ |

Signature of the volunteer & Date

Signature of the Programme Officer &
Date (With Seal)

Volunteership & Undertaking Certificate

It is certified that Shri/Kumari _____
Son/daughter of Shri _____
is a bonafide student of (name of institution)

He/ she is a regular NSS Volunteer from _____
and has completed his/ her one year of volunteership & attended One Special
Camp (if attended mention details).

- a) He / she is neither a member of NCC nor a member of Scouts and Guides/
Rovers/ Rangers.
- b) He / She has not attended any Pre RD Camp earlier.
- c) He /She is not related to any NSS Officer/Official.

Signature of Programme Officer
With seal

Signature of Principal
With Seal

CERTIFICATE OF MEDICAL / PHYSICAL FITNESS

Signature of the candidate: _____

I do hereby certify that I have examined

Mr./Ms. _____

Son/daughter of _____

and found him/her fit for Undergoing rigorous training for Pre- Republic Day/Republic Day Camp 2022/2023.

- He/She is already administered 2 dozes of Covid-19 vaccination.
- The candidate whose signature is given above is not suffering from any communicable or chronic disease, which may cause any hindrance in his/her participation in the above mentioned rigorous training programme.

Station:

Signature of the Medical Officer

Date:

Seal:

FORM OF INDEMNITY BOND

In consideration of me being nominated at my request to undergo all types of training and also participating in any camp/course/ adventure training activities in/ outside NSS and travelling I undertake and agree that neither I nor my executer/ administrator will make any claim against the Government of India or against any officer of NSS/ Principal/ Programme Officer/Programme Coordinator/ State NSS Officer/ / Youth Officer/ Assistant Programme Adviser/ Deputy Programme Adviser/ Programme Adviser in respect of any loss or injury to the property or person (including injury resulting in death), which I may suffer while or in consequence of me being in training/ participating in any camp / course/adventure training activities in/out side NSS and travelling. I understand that no compensation will be paid by Government of India or any Officer as mentioned against any such loss or injury (including injury resulting in death) and I agree so as to bind myself, executers and administrators to indemnity to the Government of India, any NSS official and any person in the service of Government of India, against any claim which may be made any third party against them or any of them arising out of any act or default on my part during or in connection of said training camp course/ NSS Pre-RD parade/ RD parade camp/adventure training / Mega Camp and journey by road/ rail/Sea/River and flight.

Signature of applicant

Signed by the applicant with address:

In the presence of Mr./Ms. _____

Witness 1: _____

Witness 2: _____

NB: One of the witnesses must be the parent / guardian of the NSS volunteer along with proper address

