

Ref: GGSIPU/USLLS/2025/ 4978

Date: 13.08.2025

**NOTICE FOR PHYSICAL REPORTING AT USLLS FOR LLM (REGULAR) PROG.**  
**ACADEMIC YEAR 2025-26.**

This is in continuation to the University Notice No: GGSIPU/Academic/2025-26/1112 dated 08.08.2025. In this regard, the Candidates who have been allotted seat in **LLM ( Regular)** programme, offered at University School of Law and Legal Studies are to report physically from 21<sup>st</sup> to 22<sup>nd</sup> August, 2025 between 10.00 A.M. to 4.00 P.M , C- Block, GGSIP University, Sector- 16-C, Dwarka, New Delhi- 110078.

DATE & DAY	TIMINGS	PROGRAMME & VENUE
21-08-2025 ( THURSDAY)	10.00 A.M. TO 4.00 P.M	<b><u>LLM ( REGULAR)</u></b> <b>ROOM NO- 408 C- BLOCK,</b> UNIVERSITY SCHOOL OF LAW & LEGAL STUDIES , GGSIPU, DWARKA
22-08-2025 ( FRIDAY)		

The candidates should report on the given date and time with the following documents:

1. Balance fees of Rs. 71,500/- to be paid in the form of Demand Draft on the name Registrar, GGSIPU payable at New Delhi or through online mode during the time of reporting.
2. Six passport size photographs of student & one passport size photographs of parents.
3. Online Registration form 2025.
4. Proof of payment of Part Academic Fee payment receipt of Rs. 96,000/.
5. CET Rank Card/ Merit Order and CET Admit Card 2025.
6. Seat Allotment Letter.
7. NLT Score/ Rank Card and NLT Admit Card 2025.
8. Proof of date of birth (Secondary School Mark- sheet & Certificate) (Original and Photocopy).
9. Mark- sheets/ Certificates of qualifying examination



10. The candidate will be required to bring the Original certificates/ 10th & 12<sup>th</sup> Mark- sheets, LLB mark sheets, Provisional & Consolidated Mark sheet in original along with photocopy of certificates. (self attested photocopy)
11. For Distance/ Open Learning Cases: In case of students who have passed the qualifying examination through distance/ open education system of any recognized University/Board/ Institution, the necessary documentary evidence related to location of his/ her study centre i.e study centre proof, certificate from the University imparting open/ distance education certifying the location of the study centre to be submitted.
12. Copy of online Reserved Categories verification slip.
13. Reserved Category Certificate: All reservation category candidates who are seeking admission in reserved category in SC/ST/DEF/PWD must bring their reservation certificate in original along with the self attested photocopy of the certificate for claiming seat against the reserved category. The defense category candidates, in addition to all the documents shall also bring appendix 1 duly completed as detailed above para.
14. Conduct and Character certificate in original from head of the institution from where the qualifying examination has been passed or from Gazetted officer in original not more than 6 months old.
15. Medical Certificate in original.
16. Photo copy of Aadhar Card
17. Printout Verification form (Appendix-6), Anti- Ragging form ( Appendix- 7 &8), Personal Details form ( All forms attached enclosed).



(Prof. Queeny Pradhan)

Dean, USLLS

University School of Law And Legal Studies  
Guru Gobind Singh Indraprastha University  
Sector-16C, Dwarka, New Delhi-110078

**Copy to:**

1. Head UITS, please upload the notice on University Website.
2. Notice Board
3. Guard file





# Guru Gobind Singh Indraprastha University

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Accredited as NAAC A++ Grade



## Appendix 6

### ADMISSION VERIFICATION FORM FOR THE ACADEMIC SESSION 2025-26

Name of Candidate: (Mr./Miss/Mrs.) \_\_\_\_\_

Father's/ Guardian's Name: (Mr./ Shri) \_\_\_\_\_

Address: \_\_\_\_\_

PIN Code \_\_\_\_\_ Tele. No. (with STD code) \_\_\_\_\_ Mobile No. \_\_\_\_\_

Email: \_\_\_\_\_

Minority Community (If applicable) \_\_\_\_\_ (Sikh / Muslim / Jain / Christian)

NLT/CET/CUET Application No. \_\_\_\_\_ Category (SC/ST/OBC/Defence/PWD/Kashmiri Migrant/Army)

NLT /CET /CUET Rank \_\_\_\_\_ Programme \_\_\_\_\_

1. School / College location of qualifying examination \_\_\_\_\_ (Delhi / Outside Delhi)

2. Date of Birth \_\_\_\_\_ Age as on 1-8-2025: 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 12<sup>th</sup> Class (Yes/No) \_\_\_\_\_

6. PCM/PCBM Percentage in 12<sup>th</sup> 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 12<sup>th</sup> Class \_\_\_\_\_

9. Category Certificate SC/ST/OBC/PWD/Defence/Kashmiri Migrants/Minority Community (Attach photocopy): \_\_\_\_\_

10. Character Certificate (Attach photocopy) (Yes/No) \_\_\_\_\_

11. Medical Certificate (Attach Original) (Yes/No) \_\_\_\_\_

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) CAT/CMAT/CET Score/Rank \_\_\_\_\_

(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. \_\_\_\_\_

Note: Use Photocopy of this form



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**Appendix 11(A)**

**PREFERENCE SHEET FOR THE ACADEMIC SESSION 2025-26**

Name of the Programme: \_\_\_\_\_

Name: Mr/Ms/Mrs. \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ PIN: \_\_\_\_\_

Telephone No. (with STD Code): \_\_\_\_\_ Mob: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ NLT/CET/CUET Application No.. \_\_\_\_\_

Category: \_\_\_\_\_ Region \_\_\_\_\_.

Give preference in order of your Priority:

S. No.	Name of the College/Institute	Programme/Branch
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____

Date : \_\_\_\_\_

(Signature of the Candidate)

(Counter Signature of Parent/Guardian)

**Note : The preference sheet is valid only for one particular counselling not for all round of counselling & waiting list. The Candidate will fill up separate preference sheet in separate counselling.**





## **Appendix 7**

### **UNDERTAKING BY THE STUDENT WITH RESPECT TO ANTI RAGGING**

- 1) I, \_\_\_\_\_ S/D of Mr./ Mrs. /Ms. \_\_\_\_\_, having been admitted to Programme/Stream \_\_\_\_\_ at (Institute/College) \_\_\_\_\_ 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 5 and clause 6.1 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 behavior 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:

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 \_\_\_\_\_ on this the \_\_\_\_ of \_\_\_\_.

\_\_\_\_\_  
Signature of deponent



**Appendix 8**

**UNDERTAKING BY PARENT/GUARDIAN WITH RESPECT OF ANTI RAGGING**

I, Mr./Mrs./Ms. \_\_\_\_\_ (full name of parent/guardian)  
father/mother/guardian of, (full name of student with admission/registration/enrolment number), 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 5 and clause 6.1 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 behave our 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 \_\_\_\_\_ on this the \_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of deponent





**Appendix 5**

**MEDICAL CERTIFICATE\*\*  
(FOR THE ACADEMIC SESSION 2025-26)  
(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*

**PERSONAL DETAILS FORM ACADEMIC SESSION 2025-2026**

FATHER PHOTO PASTE	MOTHER PHOTO PASTE	STUDENT PHOTO PASTE
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1. University Enrollment No \_\_\_\_\_

2. Name of the Student (IN CAPTIAL LETTER) \_\_\_\_\_

3. Students Phone No \_\_\_\_\_

4. Students Email ID (IN CAPTIAL LETTER) \_\_\_\_\_

5. Date of Birth  
( As per matriculation  
Certificate)

DD ( Day)

MM ( Month)

YYYY ( Year)

6. Gender ( Male / Female) \_\_\_\_\_

7. Father's Name (IN CAPTIAL LETTER) \_\_\_\_\_

8. Occupation with Official Address \_\_\_\_\_  
\_\_\_\_\_

Contact No (Office) \_\_\_\_\_ Mobile No \_\_\_\_\_

9. Father's Email ID ( IN CAPTIAL LETTER) \_\_\_\_\_



10. Mother's Name ( IN CAPTIAL LETTER) \_\_\_\_\_

11. Occupation with Official Address \_\_\_\_\_

Contact No (Office) \_\_\_\_\_ Mobile No \_\_\_\_\_

Mother's Email ID (IN CAPTIAL LETTER) \_\_\_\_\_

12. Present Address \_\_\_\_\_

13. Permanent Address \_\_\_\_\_

14. Admission Category \_\_\_\_\_  
( ODG/DG/ODSC/DSC/ODST/DST/PH.DEFENCE/J&K)

15. Percentage of Marks at 10+2 level \_\_\_\_\_

16. Disability if any (Certificate enclosed) \_\_\_\_\_

17. Aadhar No. & Copy Enclosed \_\_\_\_\_

I hereby declare that all the information is given by me true and correct to the best of my knowledge and belief.

Mother's Signature & Date	Father's Signature & Date	Student's Signature & Date