APPOINTMENT OF OFFICE BEARERS

All the members of the Film and Photography Society are invited to apply for the different posts of office bearers for the academic session 2017-18. The positions are as follows:

1. Organising Head
2. Publicity Head
3. Organising Secretary
4. Publicity Secretary
5. Resource In-charge

The office bearers will be selected by the faculty coordinators of the society after an interview and on the basis of the participation and contribution of the candidates towards the society activities so far. The form has to be submitted (in hard copy) to any one amongst the undersigned.

The forms must be submitted by 31st of October, 2017, 05:00 PM. The date, time and venue of interview will be announced after the receipt of applications.

Mr. Vinay Shanker  
Co-ordinator Faculty  
Assistant Professor  
USMC

Dr. Sumit Dookia  
Co-ordinator Faculty  
Assistant Professor  
USEM

Ms Hemlata Chauhan  
Co-ordinator Faculty  
Assistant Professor  
USAP

To: Copy to: Server Room (for upload please)
FILM AND PHOTOGRAPHY SOCIETY  
(under the aegis of Srijan – a Society for Creative Expression)  
Directorate of Students' Welfare  
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY  
Sector- 16C, Dwarka, New Delhi - 110078  

(Nomination for the post of office bearer)  

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<thead>
<tr>
<th>Post applied for:</th>
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<tbody>
<tr>
<td>Name:</td>
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<tr>
<td>School:</td>
</tr>
<tr>
<td>Programme:</td>
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<tr>
<td>Class / Year:</td>
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<tr>
<td>Member of FPS Since:</td>
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FPS programmes that you have contributed to:  


Are you member of other clubs in the University? If yes, mention their names:  


Are you an office bearer of any other club/s in the university? If yes, mention their names and your position there:  


How would you contribute to the club activities if appointed for this position?

I am a bona-fide student of Guru Gobind Singh Indraprastha University, Dwarka Campus in the academic year 2017-18. The information provided by me in the above form is true to the best of my knowledge.

Signature: ____________________________

Name: ________________________________

Date: ________________________________

Place: ________________________________