

**DELHI JAL BOARD** PROJECT DIRECTOR (TRAINING) ROOM NO. 2, VARUNALAYA PHASE-I KAROL BAGH NEW DELHI:-110005

No.DJB /P.D.(Trg) / F. 05 /2012-2013 15650

Data								
Date:	CO CO	er n	_	_				

#### CIRCULAR

The Centre for Disaster Management Studies, Guru Govind Singh Indraprastha University have started a course in MBA (Disaster Management) of two years duration for working professionals. course will be conducted on Saturday and Sunday from 9 a.m. to 5 p.m. The course starts from 1st August 2012 The last date of submission of application is 23rd July 2012.

Interested Officers of Assistant Engineers (Electrical & Civil) and Administrative Officer level or above who are willing to work in Disaster Management Cell and can spare the time on Saturdays and Sundays for the next two years, may apply in the prescribed proforma attached herewith to the undersigned. The last date of receipt of application will be 23/07/2012 upto 5.00 p.m. Application received after 23/7/2012 will not be considered. The course fee will be payable by the Training Cell, Delhi Jal Board.

Encl ; As above.

Encl: as above.

PROJECT DIRECTOR (TRG)

All DDOs EDP

Copy to;

CEO, DJB for kind information. 1. 2.

Member (Admn)/ Member (Finance) Member (Water) for kind information 3.

All Chief Engineers for kind information. Addl. CEO, DJB/ / CVO for kind information. 4.

5. Director (A&P) / Director (Finance)/ / Director (Vig.) Director (Rev.) (RMS) for kind information. 6.

All SEs / Joint Directors

7. Master File / office copy.

PROJECT DIRECTOR (TRG



# Guru Gobind Singh Indraprastha University Sec 16 C, Dwarka, New Delhi-110075

#### ADMISSION FORM

#### WEEKEND PROGRAMMES

Paste a Self Attested Passport Size Photograph

(SESSION 2012-13)

	PROGRAMME APPLIED FOR:
1.	Please tick mark $()$ in the appropriate box.
2.	Use separate forms for each programme. However, one application form can be used for applying for MBA, (MBA (Consultancy Management), MBA (Banking & Insurance) and MBA (Real Estate) programmes only and one application form for LLM (Cyber Law and Cyber Crime) or LLM (Intellectual & Industrial Property Law).
10.39	XSRAMME APPLIED FOR:
Uni	versity School of Management Studies (USMS)
	MBA / MBA(Consultancy Management)/ MBA (Banking & Insurance) MBA (Real Estate)
Cen	ntre for Disaster Management Studies (CDMS )
	MBA (Disaster Management)
Uni	iversity School of Mass Communication (USMC)
	Master of Journalism and Mass Communication (MJMC)
Uni	iversity School of Law and Legal Studies (USLLS)
	LLM (Cyber Law and Cyber Crime)
	LLM (Intellectual & Industrial Property Law)
L	
1.	CANDIDATE'S NAME (In Capitals)
	FIRST MIDDLE SURNAME
2.	FATHER'S NAME (In Capitals)

(Please do not repeat name)
3. COMPLETE POSTAL ADDRESS IN CAPITAL LETTERS. (Please do not repeat name)
PINCODE
STATE
MOBILE
TELEPHONE
FAX
EMAIL
4. DATE OF BIRTH (In Christian Era)  D D M M Y Y Y Y
5. NATIONALITY: INDIAN OTHER
6. SEX:  MALE  FEMALE
7. MARITAL STATUS: MARRIED UNMARRIED
8. REGION* DELHI OUTSIDE DELHI
9. CATEGORY: GENERAL SC ST PH
DEFENCE UNIV. EMPLOYEE
TEACHER OF AFFILIATED INSTITUTION
TYPE OF SPONSORSHIP: GOVT. SPONSORED OTHERS
10. The Color of the Sponsorship Certificater Management), kindly attach the sponsorship certification of the Sponsorship Certificat

(In case of government employees applying for MBA (Disaster Management), kindly attach the sponsorship certificate

<sup>\*</sup> Tick the box titled "Delhi", if you have passed your qualifying examination from any college located in Delhi or from any institution affiliated to GGSIP University. Tick the box titled "Outside Delhi" if you have passed your from the employer) qualifying examination from any college located in any other part of the country (India) excluding the institutions affiliated to GGSIP University.

### 11. DETAILS OF EXAMINATION PASSED :

Examination	Degree Board/University	Year	Name/ Address of the Institution	Percentage of Marks
12th (Sr. Secondary)				
Qualifying Degree				
(Graduation or its				
equivalent)				Marie Company of the State of t
Other qualifications,				
if any				sing(a)

Note: Please attach attested photocopies of the marks-statement of the qualifying examination(s)

12.	WORK EXPERIENCE:
	TOTAL EXPERIENCE:
	(in completed years as on 30.07.2012)

Sr. No.	Organization Name,	Designation	Worked		Nature of work
	Address & Telephone No.		From	То	
					e "

Note: Please attach attested photocopies of the experience certificate.

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14.	I hereby the state withhel	d any informateria	and information. If it is a particular,	found at a lat I realize that	ter stage that I am liable t	any inform to prosecut	nation furnis	hed herein the admis	the university the correct and correct and is fraudulent ission to the parties and its subject to value to value is subject to value.	rogramme and other

Date:\_

- 1. The failure to submit any of the eligibility documents may result in rejection of the application form. Notes:
- 2. The applicants are advised to submit the application/admission form with the eligibility documents as per the Admission Brochure before the last date for submission of application form.



# MEDICAL CERTIFICATE\*\*

(TO BE SUBMITTED AT THE TIME OF COUNSELLING/ADMISSION)

	son/
I certify that I have carefully examined Shri/Km/Smt.*	whose signature is given below.
daughter/wife of Shri/Smt.*  Based on the examination, I certify that he/she is in good mental and phy defects which may interfere with his/her studies including the active outdoor	ical health and is free from any physican
Visible Mark of Identification	
Signature of the Candidate	
Place :	
Date :	Name & Signature of the Medica Officer with Seal and Registratio Number
*Strike whichever is not applicable.  ** To be signed by a Registered Medical Practitioner holding a Medical Note: Blind (including colour blind), deaf and/or dumb cand in Bachelor of Homeopathic Medicine and Surgery (BHMS)	O

Note: Use photocopy of this Form

## Verification by the DDO.

14 :- 17 :5:	
It is Verified that the above enclosed	information submitted by
s/o, w/o of Sh.	
has been che	cked from his /
records / education & professional certificates	etc. and found correct.
	Signature of the DDO With Name Designation & Office Stamp.
Date: / / 2012	NoCell