

GOVT. OF NATIONAL CAPITAL TERRITORY OF DELHI
D I R E C T O R A T E O F E D U C A T I O N
(ACT - I BRANCH)
OLD SECTT: DELHI-54

NO.DE.15(258)/Act-I/2015/ 6496 - 6503 Dated:- 08/02/2016

CIRCULAR

Sub: Dispensing with the requirement of submitting affidavits and documents attested by a gazetted officer in connection with grant of Essentiality Certificate to the Societies /Trusts, Recognition and up-gradation of Private Unaided Schools.

In continuation of this Directorate's Circular No.DE.15 (258)/Act-I/2015/4560-4568 dated 09-11-2015 on the subject cited above, all concerned are hereby directed to also submit their self-declaration in the proforma annexed herewith, while submitting their requests for grant of Essentiality Certificate, approval for Scheme of Management and Recognition/up-gradation of schools.

This issues with the approval of Competent Authority.

P.Lata
08/02/16

(P.LATA TARA)
DY. DIRECTOR OF EDUCATION (ACT-I)

NO.DE.15(258)/Act-I/2015/ 6496 - 6503 Dated:- 08/02/2016

Copy to the:-

1. OSD to Dy. Chief Minister/Minister of Education, GNCT of Delhi, Delhi Secretariat, New Delhi-110002.
2. P.S. to Pr. Secretary (Education), Dte. of Education, GNCT of Delhi.
3. P.S. to Director (Education), Dte. of Education, GNCT of Delhi.
4. P.A. to Addl. DE (Act-I), Dte. of Education, GNCT of Delhi.
5. All DDEs/EOs/DEOs, Dte. of Education, GNCT of Delhi.
6. OS (IT), CAL Lab, Dte. of Education, Timarpur, Delhi with the request to make necessary changes in on line application format of granting Essentiality Certificate, Recognition and up-gradation to Private Unaided Schools.
7. OS(IT) with the request to upload the said circular on departmental website.
8. Guard file.

P.Lata
08/02/16

(P.LATA TARA)
DY. DIRECTOR OF EDUCATION (ACT-I)

27/2

MODEL OF UNDERTAKING/SELF-DECLARATION FORM

SELF -DECLARATION FOR GETTING SERVICES FROM GOVERNEMNT DEPARTMENTS/LOCAL BODIES/AUTONOMOUS INSTITUTIONS UNDER THE GOVERNMENT OF NCT OF DELHI

The written declaration as given hereunder will be included at the end of the application form for seeking the services:

I _____ Son/Daughter of Shri _____

Age _____ years resident of _____ do hereby affirm and declare that the information given above and in the enclosed documents is true and correct to the best of my knowledge and belief and nothing material has been concealed therein. I am well aware that concealment of facts and giving false information is punishable offence and in case I am guilty of giving false information or concealment of facts herein, I will be liable to be punished with imprisonment and/ or fine as per the relevant provisions of law. I also undertake that the benefits availed by me by furnishing such false information or concealment of the facts shall be liable to be summarily withdrawn.

Signature _____

Full Name in Capital Letters _____

Place _____