



GONDWANA UNIVERSITY, GADCHIROLI
(Established by Government of Maharashtra Notification No. MISC -2007/(322/07) UNI -4 Dated 27th Sept. 2011 &
Presently a State University governed by Maharashtra Public University Act, 2016 (Maharashtra Act No. VI of 2017)



National Service Scheme

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पत्र क्र. No.GU/NSS/ 572/2018

Dt: 10/10/2018

प्रति,
मा. प्राचार्य/रासेयो कार्यक्रम अधिकारी,
संलग्नीत सर्व रासेयो महाविद्यालये,
गोंडवाना विद्यापीठ गडचिरोली.

विषय: राष्ट्रीय एकात्मता शिबीराकरीता स्वयंसेवक/स्वयंसेविका पाठविण्याबाबत.

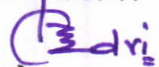
संदर्भ: F.18/10/NSS/RD/2018-19/746-762, Dated 8th November 2018

महोदय/महोदया,

उपरोक्त संदर्भाकरीत विषयान्वये आपणास कळविण्यात येते की, मा. क्षेत्रिय संचालक, क्षेत्रिय संचालनालय, युवा व खेल मंत्रालय भारत सरकार रासेयो, पुणे यांनी मंजूरी दिल्या प्रमाणे दिनांक १५/११/२०१८ ते २१/११/२०१८ या कालावधीमध्ये शिवाजी विद्यापीठ कोल्हापूर, महाराष्ट्र येथे राष्ट्रीय एकात्मता शिबीराचे आयोजन करण्यात आले आहे. यामध्ये गोंडवाना विद्यापीठातील ०३ स्वयंसेवक व ०३ स्वयंसेविका असे एकुण ०६ विद्यार्थी शिबीरामध्ये सहभागाकरीता पाठवायचे आहेत. त्याअनुषंगाने आपल्या महाविद्यालयातील सांस्कृतिक क्षेत्रातील आवड असलेल्या सर्वोत्कृष्ट इच्छुक ०१ रासेयो स्वयंसेवक/स्वयंसेविकेची माहिती रासेयो कार्यालय गोंडवाना विद्यापीठ गडचिरोली यांच्याकडे संलग्न प्रपत्रामध्ये भरून दिनांक २०/१०/२०१८ पर्यंत पाठवावी.

धन्यवाद!

टिप—विद्यार्थांचा स्वतंत्र BIO-DATA व प्राविण्य प्रमाणपत्र सोबत जोडावे.


डॉ. नरेश मडावी
संचालक प्र.

रासेयो, गोंडवाना विद्यापीठ गडचिरोली.

माहितीस्तव

मा. डॉ. नरेंद्र आरेकर, रासेयो जिल्हा समन्वयक गडचिरोली.

मा. डॉ. विजया गेडाम, रासेयो जिल्हा समन्वयक चंद्रपूर.

Annexure-I

BIODATA OF PARTICIPANT

NATIONAL INTEGRATION CAMP-2018	
A: PERSONAL DETAILS (in capital letters)	
Name: Mr/Ms : _____ (Surname) (First name)	<p>Paste Passport Size Photograph here</p>
Father's Name : _____	
NSS Volunteer / NSS Prog Officer : _____	
Date of birth : _____ Male / Female: _____	
Class Studying in : _____ Whether SC/ST/OBC/GEN: _____	
University/+2 : _____ State/U.T.: _____	
B: CONTACT DETAILS	
College /Institution Name & Address:	Residential/ Permanent Address:
Telephone No :	Telephone No :
Fax No :	Mobile No :
E mail ID :	E mail ID:
C: OTHER DETAILS	
(i) Food habit: Veg / Non-Veg: _____	(iii) NSS Enrollment Year: _____
(ii) NSS Camps attended: _____	(iv) No of years completed in NSS: _____
Signature of the NSS Volunteer	Signature of the NSS Programme Officer

..... COLLEGE
NATIONAL SERVICE SCHEME



INDEMNITY BOND

In consideration of my 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 executor/administrator will make any claim against the Government of India or against any officer of NSS/Principal/Programme Officer/Programme Coordinator/State Liaison 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 my being in training/ participating in any camp/course/adventure training/ activities in/outside NSS and travelling and I understand that no compensation will be paid by Government of India or any such loss or injury (including injury resulting in death) and I agree so as to bind myself, executors and administrators to indemnity to the 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 Camp/adventure training and journey by road/rail/sea/river/and flight. In case of any mistake done by me, I will be responsible for it.

Signature of Applicant

With Address :

In the presence of the following witness -----

Witness 1 -----

Witness 2 -----

NB: witness must be parents or guardian of the NSS Volunteer.

Date: / /

Annexure-III

NSS Volunteership Certificate – A Specimen

It is certified that Shri/Kum..... 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 volunteer ship and he/she is neither a member of NCC nor a member of Scouts and Guides/ Rovers/Rangers.

**Signatures of the Programme Officer
with seal**

**Signatures of the Principal
with seal**

Note: Volunteership certificate should be on the letter head of the college/ Institution.

Certificate of Medical / Physical Fitness – A Specimen

Signature of the Candidate.....

**I do hereby certify that I have examined Mr./Ms.....
S/o/D/o..... and found fit for undergoing rigorous training for
National Integration Camp/ Pre-Republic Day/Republic Day Camp/Adventure Camp/NSS
Mega Summer Camp**

**The candidate whose signature is given above is not suffering any
communicable or chronic disease, which may cause any hindrance in his/her participation
in the above-mentioned rigorous training programme.**

Station:

Dated:

**Signature of the Medical Officer
with Registration Number & Seal**

