



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))

Office of the Director Students' Development

Dr. Priya Gedam

(I/c.) Director Students' Welfare

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पत्र क्र. No.GU/DSW / 905/2024

Dt: 22/10/2024

प्रति,

मा. प्राचार्य/विभाग प्रमुख

संलग्नित महाविद्यालय व पदव्युत्तर शैक्षणिक विभाग

गोंडवाना विद्यापीठ, गडचिरोली

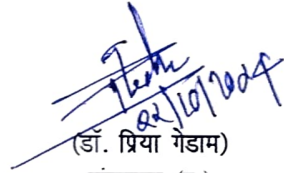
विषय : राज्यस्तरीय आंतरविद्यापीठ सांस्कृतिक युवा महोत्सव इंद्रधनुष्य स्पर्धेत भाग घेण्या करिता विद्यापीठाच्या सांस्कृतिक संघाची प्रथमिक निवड चाचणी २०२४ निकालाबाबत.

महोदय,

आपणस कळविण्यात येते की, उपरोक्त विषयांकित पत्रान्वेय राज्यस्तरीय आंतरविद्यापीठ इंद्रधनुष्य सांस्कृतिक युवामहोत्सव २०२४ चे अयोजन ०५ ते ०९ नोव्हेंबर २०२४. डॉ. पंजाबराव देशमुख कृषि विद्यापीठ, कृषि नगर अकोला येथे करण्यात आले आहे. विद्यापीठाचा सांस्कृतिक संघ वेगवेगळ्या २६ सांस्कृतिक कार्यक्रमांमध्ये भाग घेत असतो. एकूण ४० कलाकार विद्यार्थी व त्यांचे इतर सहकारी या स्पर्धेत भाग घेणार आहे. सदर स्पर्धेकरिता विद्यापीठाच्या संघाची सत्र २०२४-२५ साठी निवडचाचणी संगीत, नृत्य, नाटक, साहित्यिक आणि ललीत कला प्रकारत दि. १७ ते १९ ऑक्टोबर २०२४ या कालावधी मध्ये आयोजित करण्यात आली होती. त्या अनुषंगाने इंद्रधनुष्य २०२४ निवड चाचणीच्या निकाल जाहीर करित आहे.

संलग्नित यादीतील विद्यार्थ्यांनी दि. २४ रोजी सकाळी ११.३० कागदपत्रे पळताळणी करिता उपस्थित रहावे प्रतीक्षा यादीतील विद्यार्थ्यांना नंतर बोलाविण्यात येईल.

धन्यवाद!


(डॉ. प्रिया गेडाम)

संचालक (प्र.)

विद्यार्थी विकास विभाग

गोंडवाना विद्यापीठ, गडचिरोली

सूचना :

१. दि. २४ ते २९ ऑक्टोबर व ३ ते ६ नोव्हेंबर २०२४ या कालावधी मध्ये इंद्रधनुष्य प्रशिक्षण शिबीर आयोजित करण्यात आले आहे. याच तयारीने विद्यार्थ्यांनी दि. २४ ऑक्टोबर २०२४ ला उपस्थित राहणे अनिवार्य आहे.
२. संलग्नित यादीतील कागदपत्रे विद्यार्थ्यांकडे असणे अनिवार्य आहे. नसल्या त्यांना अवेध करण्यात येईल व विद्यापीठ संघाकरीता त्यांचा विचार करण्यात येणार नाही याची सर्वनी नोंद घ्यावी.
३. विद्यार्थ्यांनी आपल्या महाविद्यालयांचा ओळखपत्र सोबत आणणे अनिवार्य आहे.
४. सोबत ०५ पासपोर्ट साईज फोटो

GONDWANA UNIVERSITY, GADCHIROLI

Student Development Department

Indradhanushya 2024

Selected Student List

Sr. No	Student Name	College Name
Selected Student List		
1	Gayatri Lakshaman Thipe	F.E.S. College Chandrapur
2	Prajwal Dharmendra Meshram	Hi-Tech College of Pharmacy, Chadrapur
3	Sakshi Ravindra Chunarkar	Shri. Dnyanesh Mahavidyalay, Navargaon
4	Sakshi Mukunda Kourase	Gramgeeta Mahavidyalay, Chimur
5	Fakira Arun Nikhade	Lokmanya Mahavidyalay, Warora
6	Gayatri Vasudeo Jadhav	Sardar Patel Mahavidyalay, Chandrapur
7	Sahil Devindra Devrmale	Rasthrpita Mahatma Gandhi College Saoli
8	Sachin Devendra Thendgare	Nevajabai Hitkarini Mahavidyalay, Bramhapuri
9	Arbaj Mustafa Sheikh	Kewalramji Harde Mahavidyalay Chamorshi
10	Umakant Vinod Mishra	Sardar Patel Mahavidyalay Chandrapur
11	Shivani Anandrao Shende	Karmavir Mahavidyalay Mul
12	Artika Upadhye	Janta Mahavidyalay Chandrapur
13	Manisha Lahuji Madavi	P.G.T.D Gondwana University, Gadchiroli
14	Achal Ramdas Gedam	Sardar Patel Mahavidyalay Chandrapur
15	Prabhodhini S. Mankar	Chintamani College Pombhurna
16	Sakshi S. Dhantole	Gramgeeta Mahavidyalay Chimur
17	Bhumika R. Dupare	Indira Gandhi Mahila Mahavidyalay Ghugus
18	Vaidehi Vilas Chaudhari	S.R.M. College Chandrapur
19	Chinmayi Chandrashekhar Madavi	Nevajabai Hitkarini Mahavidyalay, Bramhapuri
20	Deepakkumar Chhaganle Sinna	Sardar Patel Mahavidyalay Chandrapur
21	Vaibhav G. Mohurle	Karmvir Mahavidyalay Mul
22	Gaurav K. Mesharam	Gramgeeta Mahavidyalay Chimur
23	Gauri V. Chandankhede	Gramgeeta Mahavidyalay Chimur
24	Shruti Uttam Nikure	Sardar Patel Mahavidyalay Chandrapur
25	Sakshi Liladhar Deshmukh	Karmvir Mahavidyalay Mul
26	Sakshi Gulab Dhengare	Ars & Comm. College Bhis

27	Krantiveer Sanjay Sidam	Janta Mahavidyalay Chandrapur
28	Rohit Divakar Meshram	Mahatma Gandhi College Armori
29	Pramod Morshwar Gedam	Chintamani College Pombhurna
30	Sakshi Rushi Shende	Ars & Comm. College Bhis
31	Tirupati Kishtayya Kallemwar	S.B. Arts & Comm. College Aheri
32	Rajan Devidas Lanjewar	Srhi. Dnyanesh Mavidyalay Navargaon
33	Shubham Namdeo Wadaskar	S.R.M. College Chandrapur
34	Nikhil Vilas Dighore	Ars & Comm. College Bhis
35	Dikshant Digambar Wakale	P.G.T.D. Gondwana University, Gadchiroli
36	Arti Anil Arke	Gramgeeta Mahavidyalay Chimur
37	Jeevan Dhanraj Ghugusakar	Athavale College Chimur
38	Vaibhav Vilas Soyam	Chintamani College Gondpipri
39	Jay Rajeshwar Patde	Chintamani College Pombhurna
40	Mithun Yenugwar	Mahatma Gandhi College Armori
Waiting Student list		
1	Yogesh Arun Sidam	Karmavir Mahavidyalay Mul
2	Vina Lula Gawade	Bhagavnatrao College Etapalli
3	Supriya Ravindra Gaikwad	Mahatma Gandhi College Saoli
4	Sachin Nirwa Gawade	Bhagwantrao College Etapalli
5	Mohandars Ishwar Komawar	Shri. Govindprabhu College Tadodhi
6	Komal Rajkumar Nagrale	Sardar Patel Mahavidyalay Chandrapur



(डॉ. प्रिया गेडाम)

संचालक (प्र.)

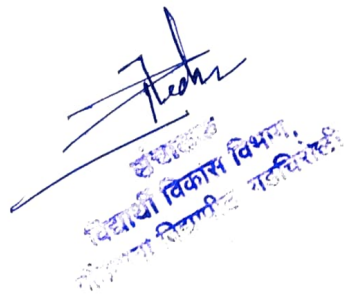
विद्यार्थी विकास विभाग

गोंडवाना विद्यापीठ, गडचिरोली

GONDWNA UNIVERSITY, GADCHIROLI
Student Development Department
State Level Inter-University Indradhanushya

Document List for Verification

1. Student Entry Form (Annexure - B)
2. Identity Card of the Current Academic Year of all Participants (Original and Attested Photocopy of each)
3. Fees Receipt of the Current Academic Year all Participants (Original and Attested Photocopy of each)
4. School Leaving Certificate. (Attested Photocopy of each)
5. 10th & 12th Marksheet (Original and Attested Photocopy of each)
6. All Semester Examination Mark sheet (Attested Photocopy of each)
7. Undertaking from all Participating Students (Original) (Annexure 1)
8. Responsibility Certificate from all Participating Students (Original) (Annexure 2)
9. Bonafide Certificate from all Participating Students (Original) (Annexure 3)
10. Physical Fitness Certificate from all Participating Students (Original) (Annexure 4)
11. Verification Certificate from all Participating Students (Original) (Annexure 5)


इष्टतम
विद्यार्थी विकास विभाग,
गोडवना विश्वविद्यालय, गडचिरोली

GONDWANA UNIVERSITY, GADCHIROLI

Student Development Department

State Level Inter-University Indradhanushya Audition

ENTRY FORM
FOR STUDENTS

Event Name	
PRN No.	
Full Name	
Father Name	
Mother Name	
Date of Birth	
Email ID	
Mobile No.	
Parents Mobile No.	
Gender	
10th Passing Year	
12th Passing Year	
Name of Present course	
Semester	
Course Type	
College Name	

Student Development officer

Annexure No. 1

Undertaking by the Participating Student

(To be given by the Participating Student)

I, undertake to state that, in consideration of my being nominated at my request to participate in **Indradhanushya: Maharashtra State Inter-University Youth Festival** to be held at following Host University as per following dates at my own risk.

Name of the Host University	
Dates of the Indradhanushya	

I undertake and agree that, neither I nor my Parent / Executor / Administrator / Mentor / Teacher / Principal will make any claim against any Officers of the University (Organizing / Participating) and/or Principal / Director / Head / Mentor / Teacher / Staff in respect of any loss or injury to the property or person (including injury resulting in death), which may suffer while participating in Indradhanushya: Maharashtra State Inter-University Youth Festival.

I, further undertake to state that I shall be abiding by all RULES and REGULATIONS (Guidelines) of the Indradhanushya: Maharashtra State Inter-University Youth Festival and shall be liable for strict disciplinary action for violation of the same.

Name of the Student Participant	
Name of the University	
Mobile No. of the Student Participant	
Title of Event/s Participated	
Date	
Signature of the Student Participant	

Annexure No. 2

Responsibility Certificate

(To be given by the Parent / Guardian of the Participating Student)

I agree, as a responsible person, that my Son/Daughter/Ward is being allowed to participate in Indradhanushya: Maharashtra State Inter-University Youth Festival to be held at following Host University as per following dates at my own risk.

Name of the Host University	
Dates of the Indradhanushya	

If any accident or death occurs during the Indradhanushya, I or any of my relation of legal heir will not demand any claim from State Government / Raj Bhavan / University (Organizing/Participating) / Department / Institute / College and Officials of the University (Organizing/Participating) / Principal / Director / Head / Mentor / Teacher / Staff on account of my Son/Daughter/Ward being a part the Indradhanushya.

Name of the Parent / Guardian	
Mobile No. of the Parent / Guardian	
Name of the Student Participant	
Mobile No. of the Student Participant	
Name of the University	
Title of Event/s Participated	
Date	
Signature of the Parent / Guardian	

Annexure No. 3

Bonafide Certificate

(To be given by the Principal of the College / Director of the Institute /
Head or Director of the Academic Department of the Participating University)

It is certified that the student mentioned below is the bonafide student of our College/Institute/Department. He/She is a regular student in the current academic year.

Name of the Student Participant	
Name of the College / Institute / Department of the Student Participant	
Name of the University	
Mobile No. of the Student Participant	
Programme	
Semester	
Specialization	
PRN No. / Registration No. given by the University	
Roll No.	

Date:

Place:

(Seal of the
College/Institute/
University Department)

Signature of the
Principal of the College /
Director of the Institute /
Head or Director of the
Academic Department
of the Participating
University

Annexure No. 4

Physical Fitness Certificate
(To be given by the Medical Practitioner)

I do hereby certify that, I have examined the below mentioned person and find him/her fit for participation in Indradhanushya: Maharashtra State Inter-University Youth Festival. He/She is not suffering from any communicable or chronic disease, which may cause any hindrance due to his/her participation in Indradhanushya: Maharashtra State Inter-University Youth Festival.

Name of the Student Participant	
Mobile No. of the Student Participant	

Name of the Medical Practitioner	
Address of the Medical Practitioner	
Contact No. of the Medical Practitioner	

Date:

Place:

Signature of the
Medical Practitioner with
Seal and Registration No.

Annexure No. 5

Verification Certificate

(To be given by Director, Students' Development/Welfare
of the Participating University)

It is certified that the student mentioned below is a bonafide student of the below mentioned College/Institute/Department of the University.

Name of the Student Participant	
Name of the College / Institute / Department of the Student Participant	
Name of the University	
Mobile No. of the Student Participant	
Programme	
Semester	
Specialization	
PRN No. / Registration No. given by the University	
Roll No.	
Title of Event/s Participated	

The information and documents provided by the student participant are verified by me and they are found correct.

Date:

(Seal of the
Department)

Place:

Signature of the
Director, Students'
Development/Welfare
of the Participating University