



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/512 /

Dt: 12/10/18

प्रति,

मा. प्राचार्य/कार्यक्रम अधिकारी, डॉ. बाबासाहेब आंबेडकर महाविद्यालय, चंद्रपूर, जि. चंद्रपूर.
मा. प्राचार्य/कार्यक्रम अधिकारी, नेवजाबाई हितकारणी महाविद्यालय, ब्रम्हपूरी, जि. चंद्रपूर.
मा. प्राचार्य/कार्यक्रम अधिकारी, राष्ट्रपिता महात्मा गांधी महाविद्यालय, सावली जि. चंद्रपूर.

विषय :राष्ट्रीय सेवा योजना स्वयंसेवकांची West Zone NSS Pre R.D.Camp 2018 करीता निवड व प्रतिक्षेत असलेल्या स्वयंसेवकाबाबत .

संदर्भ: भारत सरकार युवा कार्य एवं खेल मंत्रालय, रासेयो क्षेत्रीय निदेशालय, पुणे F.No. 30/10/NSS/RC/2018/888-850, दि. १० आक्टोंबर २०१८ चे पत्र.

महोदय/महोदया,

उपरोक्त संदर्भाकीत विषयान्वये आपणास कळविण्यात आनंद होत आहे की, आपल्या महाविद्यालयातील खालील रासेयो स्वयंसेकांची निवड West Zone NSS Pre R.D.Camp 2018 करीता झालेली आहे.

निवड झालेल्या स्वयंसेवकांची यादी

अ.क्र	विद्यार्थ्याचे नाव	महाविद्यालयाचे नाव	मोबाईल नंबर
१	श्री. धवल केतन रामटेके	डॉ. बाबासाहेब आंबेडकर महाविद्यालय, चंद्रपूर, जि. चंद्रपूर.	९७६३४७४२८७
२	कु. प्राची श्रीकृष्ण नागपुरे	नेवजाबाई हितकारणी महाविद्यालय, ब्रम्हपूरी, जि. चंद्रपूर.	८२४८९८८६०४

प्रतिक्षेत असलेल्या स्वयंसेवकांची यादी

१	श्री. अभिषेक राजेश शर्मा	डॉ बाबासाहेब आंबेडकर महाविद्यालय, चंद्रपूर, जि. चंद्रपूर.	९७६३७९९८६२
२	कु. वसंती दिलीप नागोसे	राष्ट्रपिता महात्मा गांधी महाविद्यालय, सावली जि. चंद्रपूर.	७०३००४५१०८

दि. २५ नोव्हेंबर २०१८ ते ०४ डिसेंबर २०१८ या कालावधीत West Zone NSS Pre R.D.Camp 2018 करीता राष्ट्रसंत तुकडोजी महाराज नागपूर विद्यापीठ, अमरावती रोड नागपूर येथे आयोजित करण्यात आलेले आहे. करीता वरील निवड झालेल्या स्वयंसेवकाना सलग्न पत्रात माहिती भरून दिनांक २४ नोव्हेंबर २०१८ रोजी संध्याकाळी ५ वाजेपर्यंत नेल्सन मंडेला वस्तीगृह एल.आय. टी परीसर, राष्ट्रसंत तुकडोजी महाराज नागपूर विद्यापीठ, नागपूर येथे उपस्थित राहण्याचे निर्देश देण्यात यावे. निवड झालेले स्वयंसेवक West Zone NSS Pre R.D.Camp 2018 करीता जाण्यास असमर्थ असल्यास त्या ठिकाणी प्रतिक्षेत असलेल्या स्वयंसेवकांची निवड केल्या जाईल.

धन्यवाद!

डॉ. नरेश मडावी

संचालक (प्र)

राष्ट्रीय सेवा योजना

गोंडवाना विद्यापीठ, गडचिरोली

माहितीस्तव

१. मा. कुलगुरू, गोंडवाना विद्यापीठ, गडचिरोली
२. मा. प्र-कुलगुरू, गोंडवाना विद्यापीठ, गडचिरोली
३. मा. कुलसचिव, गोंडवाना विद्यापीठ, गडचिरोली
४. मा. जिल्हा समन्वयक जिल्हा-गडचिरोली, जिल्हा-चंद्रपूर

REPUBLIC DAY PARADE CAMP-2018-19 NOMINATION FORM	
A: PERSONAL DETAILS (in capital letters)	
(i) Name: <u>Mr./Miss</u> _____	
(ii) Nomination is for.....	(Surname) (First name)
(iii) Date of birth: _____	
(iv) Father's Name: _____	
(v) Mother's Name: _____	
(vi) Class Studying in : _____	
B: CONTACT DETAILS	
(i) Contact Address & Telephone no. (<u>College</u>)	(ii) Permanent Address & Telephone no (<u>Residence</u>)
Telephone No(s): Mobile No(s):	Telephone No(s): Mobile No(s): E mail ID
C: NSS UNIT DETAILS	
(i) Name & Address of Prog. Officer	(i) Name & Address of Prog. Coordinator
Telephone No(s): Mobile No(s):	Telephone No(s): Mobile No(s):
D: OTHER DETAILS	
(i) Height (in cm) _____	(ii) Weight (Kg.) _____
(iii) Food habit: <u>Veg/ Non-Veg</u> _____	(iv) Blood Group: _____
(v) NSS Camps attended:	(vi) NSS Enrollment Year: _____
	(viii) Hobbies:
Signature of the Volunteer & Date	Signature of the Prog. Officer & Date (SEAL)

Certificate of Medical/Physical Fitness – A Specimen

Signature of the Candidate.....

I do hereby certify that I have examined
Mr./Ms.....Son/Daughter of..... and found fit for
undergoing rigorous training for Pre-Republic Day/Republic Day Camp.

The candidate whose signatures are 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.

**Signature of the Medical Officer
with Seal**

Station: _____

Dated: _____

Form of Indemnity – A Specimen

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 traveling I undertake and agree that neither I nor my executer/ 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 may suffer while or in consequence of my being in training/ participating in any camp/course/adventure training activities in/ outside NSS and traveling and I understand that no compensation will be paid by Government of India or any Officer as mentioned against any such loss or injury (including injury resulting in death) and I agree so as to bind myself, executers and administrators to indemnity to the Government of India, any NSS official and any person in the service of Government of India, against any claim which may be made any third party against them or any of them arising out of any ac or default on my part during or in connection of said training camp/course/NSS Pre-RD Parade/RD Parade Camp/adventure training and journey by road/rail/sea/river/flight.

Signatures of the applicant with address

In the presence of
Witness 1

Witness 2

NB: One of the witnesses must be the parent/guardian of the NSS volunteer with address

Volunteer ship Certificate – A Specimen

It is certified that Shri./Kum..... Son/Daughter of
Shri..... is a bona-fide 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.

He has attended NSS Special camp from.....to..... (Date) at..... (Venue)

**Signatures of the Programme Officer
with seal**

**Signatures of the Principal
with seal**

Undertaking for participation in NSS Pre RD Camp

It is certified that Shri./Kum..... Son/Daughter of
Shri..... is a bona-fide student of (name of institution)
.....

He/ She is a regular NSS volunteer from..... and has not participated
in any NSS Pre RD Camp earlier.

It is further certified that, he is not related to any NSS officer/Official.

**Signatures of the Programme Officer
with seal**

**Signatures of the Principal
with seal**

ARTICLES OF DAILY USE

1. Light bedding
2. Torch with cells
3. White trousers and shirt (both for boys and girls) -2 pairs
4. White canvas shoes (1 pair)
5. White Socks (3 pairs)
6. White Pullover (Sweater 'V' Neck)
7. Black shoes for parade practice (1 pair)
8. Clothes for daily use
9. Baggage which can be locked properly with lock & key
10. NSS Badge, University Banner/Flag.
11. College/ Institution/ University Identity card
12. Costumes ,CDs, musical instruments for cultural activities
13. One set of traditional costumes of State for celebration of State Day.
14. Daily routine toilet items ,Shoe polish
15. Essential medicines
16. Activity photographs, banners, posters/CDs/DVDs, documentaries for exhibition
17. Annual published report (if any) published by the college/University for display
18. Participants are advised **not to carry** with them gold ornaments and valuable items.

Documents:

Indemnity Bond as per Performa.

Physical/Medical Fitness Certificate in Performa.

NSS Volunteer ship Certificate in Performa. Undertaking that he/she has not attended any Pre RD camp & not related to NSS Officer/NSS Official

Mandate form

Passport Size photographs: 3 Nos.

Note: Further, the volunteers may be advised **not to carry any precious things like Gold/Jewelry and heavy amount of cash etc.** with them.

Proforma-III

MANDATE FORM
Electronic Clearing Service (Credit Clearing)/ Real Time Gross Settlement (RTGS)
facility for receiving payments.

A. Details of Accounts Holders:-

Name of Account Holder	
Unique Aadhar Number	
Whether Unique Aadhar Number linked with this Bank	
Complete Contact Address	
Telephone Number/Fax/E-mail	

B. Bank Account Details:-

Bank Name	
Branch Name with Complete Address, Telephone No. and E-mail	
Whether the Branch is computerized?	
Whether the Branch is RTGS enabled? If yes then what is the Branch's IFSC Code	
Is the Branch also NEFT enabled?	
Type of Bank Account (SB/Current /Cash Credit)	
Complete Bank Account No. (Latest)	
MICR Code of Bank	

Date of effect:-

I hereby declare that the particulars given above are correct and complete. If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information I would not hold the use Institution responsible. I have read the option invitation letter and agree to discharge responsibility expected of me as a participant under the Scheme.

Signature of Customer

Date

Certified that the particulars furnished above are correct as per our records.

(Bank's Stamp)

Date:

Signature of Bank Official

LIST OF PARTICIPANTS

STATE:

SN	Name of Volunteer	Father's Name	Male/ Female	Date of Birth	Height	Class Studying in	Name of Institution	Name of the University	Residential Address with contact/ Mob no. Email ID
1									
2									
3									
4									
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15									
16									

REGIONAL DIRECTOR NSS