MAHARAJA SURAJMAL INSTITUTE C-4, Janak Puri, New Delhi-110058

Website: www.msijanakpuri.com ACADEMIC SESSION 2023-24

Documents Verification Form for B.Ed. Programme

Name of Student	CAT-2022/CMAT-2023/ CET-2023 RANK
CAT-2022/CMAT-2023/ CET-2023 Roll No	Student's Mobile No
Father's Name	Father's Mobile No
E-Mail	

S. No.	University File (I-Set)	MSI File (Office) (II–Set)
1	Admission verification form	Admission verification form
1.	(Appendix 6 of GGSIPU Brochure) (Original)	(Appendix 6 of GGSIPU Brochure) Photocopy
2.		Institute Admission Forms (in MSI Brochure) both set – Original
3.	CET-2023 Admit card (Original)	CET-2023 Admit card (Photocopy)
4.	CET-2023 Rank/Score card (Original)	CET-2023 Rank/Score (Photocopy)
5.	GGSIPU Allotment Letter (Photocopy)	GGSIPU Allotment Letter (Photocopy)
6.	Rs 60000. Part Academic Fee Receipt (Photocopy)	Rs 60000. Part Academic Fee Receipt (Photocopy)
	MSI Fees Receipt duly signed by Account Section of	MSI Fees Receipt duly signed by Account Section of MSI
	MSI (Photocopy)	(Photocopy)
7.	B.Ed. – Rs.58650 /	B.Ed. – Rs. 58650 /
,.	Online/DD in favour of "Maharaja Surajmal	Rs. 5,000 /- as upgradation fee, if applicable
	Institute" payable at New Delhi	Online/DD in favour of "Maharaja Surajmal Institute"
	Institute payable at 10 % 20 m	payable at New Delhi
	Rs. 5,000 /- as upgradation fee, if applicable	Copy of upgradation fee payment, if applicable
8.	DD in favour of "Registrar, GGSIP University"	DD in favour of "Registrar, GGSIP University"
	payable at New Delhi	payable at New Delhi
9.	Undertaking Anti Dagging (Student) Original	Undertaking Anti Ragging (Student) Photocopy - Appendix- 7
	Undertaking Anti Ragging (Student) Original –	of GGSIPU Brochure
	Appendix- 7 of GGSIPU Brochure	Undertaking Anti Ragging (Parents) Photocopy- Appendix- 8 of
	Undertaking Anti Ragging (Parents) Original-	GGSIPU Brochure
	Appendix- 8 of GGSIPU Brochure	Undertaking Attendance (Students) of MSI-Original
	Affidavit for Gap year if applicable (Original) stamp paper	Undertaking Attendance(Parents) of MSI-Original
	of Rs.10/- by Notary	Affidavit for Gap year if applicable Photocopy- Stamp paper of
	of RS.10/- by Notal y	Rs.10/- by Notary.
10.	10 th Passing Certificate	10 th Passing Certificate (Photocopy, self attested)
10.	(Photocopy, self attested)	
11.	12 th Mark sheet (Photocopy, self attested)	12 th Mark sheet (Photocopy, self attested)
12.	12 th Passing Certificate or provisional (Photocopy self attested)	12 th Passing Certificate or provisional (Photocopy, self attested)
13.	Graduation Marksheets of all the years (Photocopy Self attested)	Graduation Marksheets of all the years (Photocopy Self attested)
14.	Degree of Graduation (Photocopy Self attested)	Degree of Graduation (Photocopy Self attested)
15.	Post Graduation Marksheets (Photocopy Self attested)	Post Graduation Marksheets (Photocopy Self attested)
16.	Degree of Post Graduation (Photocopy Self attested)	Degree of Post Graduation (Photocopy Self attested)
17.	Caste category / Physical Handicapped verification slip	Costs acts and / Dissoired Heading 1 1 1 1 1 1 1 1
	issued by GGSIPU in Original along with Caste	Caste category / Physical Handicapped verification slip issued
	Certificate photocopy.	by GGSIPU along with Caste Certificate photocopy.
10	Medical Certificate (Appendix 5) in GGSIPU Brochure	Madical Cartificate (Photocopy)
18.	(Original)	Medical Certificate (Photocopy)
19.	Character Certificate (Original)	Character Certificate (Photocopy)
20.		Library card form (Original) in MSI Brochure
21.		Photograph (5 Nos.) (4-Passport size and 1-Stamp Size)

Signature of Faculty

Signature of Convener Verification Counter No:



(A State University established by the Govt. of NCT of Delhi) Sector-16-C, Dwarka, New Delhi-110078 25

UNDERTAKING FROM RESULT AWAITED CANDIDATES FOR SEEKING PROVISIONAL ADMISSION FOR ACADEMIC SESSION 2023-24

				date), Son/Daughter/Wife of
		(Father's/Husband's n	ame), NLT Applicatio	n No/CET Application No
(Perma	nent Address) seeking	admission to		Name of the Programme
of GGS	SIP University, hereby	solemnly affirm and decl	are:	
deg (Be	gree) e.g. B.A., pard/University) durin	B.Sc. etc.,)	n allotted College/ Inst	year (name of the qualifying _ Examination, 2022 of itute, the result of which has mber, 2023, 2022;
ii) Ih	ave passed all the pape	ers of the qualifying degre	ee	(name of the qualifying
deg	gree) examination other	er that the final year /final	semester examination	
iii) Ih	ave no compartment as	s on this date in my 12 th c	lass/qualifying degree	examination.
qua	alifying degree examin		ty and not on account	nal year/final semester of the of compartment in current or ion.
und De app for Sej	derstand that in the an/Principal/Director propriate proof of my/s admission to otember, 2023, 2022;	ne event of my/my of the concerned Schoo my ward securing at least(Name	ward's failure to l/College where the a marks of the Course) of	submit to the concerned admission has been granted, in the qualifying examination GGSIP University by 30th course will automatically get Deponent
Verific	ation:			z · p · m·m·
Verifie	d at	on this	day	of, 2022
				my knowledge and belief. No
		material has been conceal		
Notes:				Deponent
i)	In case the candidate signed by his/her par	•	years of age; in that ca	ase, the Undertaking shall be
ii)	Undertaking was sub		e cancelled and legal p	ound at any stage that false proceedings shall be initiated,

Appendix 5



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

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Sector-16-C, Dwarka, New Delhi-110078



MEDICAL CERTIFICATE** (FOR THE ACADEMIC SESSION 2023-24) (TO BE SUBMITTED AT THE TIME OF COUNSELLING/ADMISSION)

Photograph duly attested by the officer who has certified this certificate

I certify that I have carefully examined Shri/Km/Smt.*	
son/ daughter/wife of Shri/Smt.*	whose
signature is given below. Based on the examination, I certify the	nat he/she is in good mental and physical
health and is free from any physical defects which may interfer	e with his/her studies including the active
outdoor duties required of a professional. Visible Mark of Identi	fication
Signature of the Candidate	
Place :	
Date :	
	Name & Signature of the
	Medical Officer with Seal and
	Registration Number
* Strike whichever is not applicable.	
** To be signed by a Registered Medical Practitioner holding a M	Medical degree.
Note: Use photocopy of this For	rm



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ADMISSION VERIFICATION FORM FOR THE ACADEMIC SESSION 2023-24

Name of Candidate:	(Mr./Miss/Mrs.)				
Address:	Tala No (with S	CTD anda)	Mob	ile No.	_
Email:	1ele. No. (with 5	STD code)	NIOU	ile No	
	y (If applicable)	(Sikh / M	luslim / Iain / Cl	nristian)	
				BC/Defence/PWD/Kashmiri Migran	t/Army)
NI.	T Rank/CET Rank	Progra	mme	BC/Belefice/1 WB/Rasimini Wilgian	(/ IIIIIy)
	T Runk CET Runk	110g1u	<u> </u>		
1 School / College I	ocation of qualifying ex	xamination		(Delhi / Outside Delhi)	
2. Date of Birth	Age as o	on 1-8-2022: years	months	(Delhi / Outside Delhi) days	
(As per Secondary S				<u> </u>	
3. Passed Senior Sec	condary Examination / 7	Three vear Diploma i	n Engg/B Sc Gr	aduation (3 yrs)	
Aggregate percent	tage of all subjects in Si	r. Secondary Examin	ation/Dip. in En	gg/ B Sc Graduation (3 yrs)	
5. Passed in English	in 12 Class (Yes/No) _		1	· • · · · · · · · · · · · · · · · · · ·	
6. PCM/PCBM Perc	entage in 12 Class				
7. Percentage in qual	lifying degree as per the	e eligibility condition	specified in PA	RT A of the Admission Brochure:	
			th		
8. Passed in Maths /	Computer Science / Co	omputer Applications	in 12 Class	Community (Attach photocopy):	
				Community (Attach photocopy):	
	cate (Attach photocopy		_		
	ate (Attach Original) (Y		-		
				aduation	
				st-graduation	
	/CET Score/Rank				
(b) Year of Passi					
	and Draft(s) for Submis				
Amt:	DD No	Bank/Branch		_	
Amti	DD No DD No	Dank/Dranch		-	
Allit.	DD No	balik/bralicii		_	
information. I realize prosecution and also	e that if any information forgo my claim to the	on furnished herein is e seat in the college.	found to be inc Further, that m	in all respects. I have not concear orrect or untrue, I shall be liable to y candidature for examination/selec- regulations of the University.	crim inal
Signature of the Pare	nt/Guardian & Date			Signature of Candidate & Date	
		FOR OFFICE	USE ONLY		
Signature of the Dep	and Verified by Univenuted Officers/Officials_/Officials				
	nt No				
omitted the officer					
		Note: Use Photocop	py of this form		



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UNDERTAKING BY THE STUDENT WITH RESPECT TO ANTI RAGGING

1,		S/D	OI	IVIT./	IVITS. /IVIS.
	, having			to	Programme/Stream
, at (Institute/C	ollege)			h	ave received a copy
of the UGC Regulations on Curbing th (hereinafter called the "Regulations") ca said Regulations.					
2) I have, in particular, perused clause 3	of the Regulati	ions and a	m aware as t	o what c	constitutes ragging.
3) I have also, in particular, perused claupenal and administrative action that is abetting ragging, actively or passively, or	liable to be t	aken agai	nst me in c	ase I an	n found guilty of or
4) I hereby solemnly aver and undertakea) I will not indulge in any behathe Regulations.b) I will not participate in or abe may be constituted as ragging un	vior or act that et or propagate	e through a	any act of co		
5) I hereby affirm that, if found guilty of the Regulations, without prejudice to an penal law or any law for the time being in	y other crimir				
6) I hereby declare that I have not been country on account of being found guilt and further affirm that, in case the decl liable to be cancelled.	y of, abetting	or being p	oart of a con	spiracy	to promote, ragging;
Declared thisday ofmo	nth of	year.			
		Name: Addres	ure of depon		
VERIFICATION Verified that the contents of this affidavir is false and nothing has been concealed of Verified at on this the	or misstated the	erein.	ny knowledg		
				S	Signature of deponent



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UNDERTAKING BY PARENT/GUARDIAN WITH RESPECT OF ANTI RAGGING

I, Mr./Mrs./Ms.	(full name of
parent/guardian) father/mother/guardian of, (full name of	of student with admission/registration/enrolment
number), having been admitted to	(name of the
institution), have received a copy of the UGC Regulatio	ns on Curbing the Menace of Ragging in Higher
Educational Institutions, 2009, (hereinafter called the "R	egulations"), carefully read and fully understood
the provisions contained in the said Regulations.	
2) I have, in particular, perused clause 3 of the Regulation	ns and am aware as to what constitutes ragging.
3) I have also, in particular, perused clause 5 and clause	6.1 of the Regulations and am fully aware of the
penal and administrative action that is liable to be taken	against my ward in case he/she is found guilty of
or abetting ragging, actively or passively, or being part of	
4) I hereby solemnly aver and undertake that	
· ·	r or act that may be constituted as ragging under
clause 3 of the Regulations.	
	or propagate through any act of commission or
omission that may be constituted as ragging un	
omission that may be constituted as ragging an	der clause 5 of the regulations.
5) I hereby affirm that, if found guilty of ragging, my w	vard is liable for punishment according to clause
9.1 of the Regulations, without prejudice to any other cr	
under any penal law or any law for the time being in force	
under any penaria wor any law for the time being in fore	c.
6) I hereby declare that my ward has not been expelled	or debarred from admission in any institution in
the country on account of being found guilty of, abet	
ragging; and further affirm that, in case the declaration is	
liable to be cancelled.	s found to be unitide, the admission of my ward is
nable to be cancelled.	
Declared this day of month of ye	aar
Declared thisday of filonthi ofye	<i>a</i> 1.
	Signature of deponent
	Name:
	Address:
	Telephone/Mobile No.:
	relephone/whome wo
VERIFICAT	ΓΙΟΝ
Verified that the contents of this affidavit are true to the b	pest of my knowledge and no part of the affidavit
is false and nothing has been concealed or misstated there	
8	
Verified aton this the	of .
	Signature of deponent

UNDERTAKING FOR ATTENDANCE

(To be signed by the parent/guardian)

I,	F/o /M	I/o			
Mr/Ms	CET Rank and Roll No				
of Batch	a student of	programme at	Maharaja Surajmal		
Institute C-4 Janakpur	i , New Delhi do hereby solen	ınly affirm and undertak	ing that my ward shall		
attend classes regular	ly and punctually and shall a	ılways maintain minimu	m 75% attendance in		
each semester.					
I understand that if 1	my ward's attendance falls	short of 75% he/she sh	all be detained from		
appearing in the End-	Term Examination and in su	ch case I shall have no	complaint against the		
Institute or University					
Date					
Signature of the Paren	t:				
Name:					
Telephone/Mobile No	s.:				
Email ID:					

UNDERTAKING FOR ATTENDANCE

(To be signed by the student)

I,	S/o/D/o	
CET Rank and Roll Number	of batch	a
student of	programme at Maharaja Surajmal Ins	titute, C-4, Janakpuri,
New Delhi do hereby solemnly a	affirm and undertake that I shall attend	classes regularly and
punctually and shall always maint	ain minimum 75% attendance in each sen	nester.
I understand that if my attendance	e falls short of 75%, I shall be detained	from appearing in the
End-Term Examination and in s	such case I shall have no complaint ag	gainst the Institute or
University.		
Date:		
Signature of the student:		
Name of student:		