



Indira Gandhi Delhi Technical University for Women

(Established by Govt. of Delhi vide Act 09 of 2012),

Kashmere Gate, Delhi – 110006

Instructions for counselling to M.tech(Part Time) Candidates

Schedule of Counselling for admission to M.Tech Part Time Programme on 24th July 2018 (Academic session 2018-19)

All eligible candidates as per the list displayed, for seeking admission to M.Tech Part time Programme are required to report at IGDTUW Delhi along with the list of documents as mentioned below, failing which they will not be allowed to appear in the counselling.

1. Reporting:

Applicants type	Reporting Time For Document Verification	Seat Allocation Time	Venue
GATE Qualified / NONGATE - SC/ST/OBC/General	9:00 am -11.00 am	11.30	Room No111, Admin Block, IGDTUW

2. Documents to be produced at the time of counselling, for admission to M.Tech (part Time) Programmes

All candidates must bring a set of self attested photocopies of the following documents along with all originals at the time of reporting/counselling as per counselling schedule:

1. Demand Draft of 85,000 in favour of “**REGISTRAR, IGDTUW STUDENT FEE S/B ACCOUNT**” payable at Delhi/New Delhi. Candidate must note that if admission is not offered then they need to bear the cancellation charge of fees draft.
2. Printout of application form duly signed by the candidate along with three passport size photograph.
3. Receipt of application fee of Rs. 1000/- paid by the candidate and its photocopy.
4. Original and self attested copy of class 10th certificate/ Mark-sheet in support of Date of Birth.
5. Original and self attested copy of both Mark sheet and Degree of qualifying examination. In case, the candidate is appearing in the qualifying degree, she should bring original and self attested copy of the pre-final year/semester (whichever applicable).
6. Original and self attested copy of GATE Score card
7. Original & Self attested copy of Identity Proof (Passport / Aadhar card / Driving license/Voter ID/ PAN card)

8. Proof of CGPA/FGPA conversion to Percentage (if applicable).
9. Original and self attested copy of Caste/ Category certificate (for the reserved categories only) issued by one of the following authorities of competent jurisdiction: For candidates belonging to OBC – Non Creamy Layer will be required to submit the Certificate issued on or later than **1st April 2018** as given in Annexure.(see the notice on www.igdtuwadmission.nic.in).
 - I. District Magistrate/ Additional District Magistrate/ Deputy Collector/ 1st Class Stipendiary Magistrate/ Commissioner City Magistrate (not below the rank of 1st class stipendiary Magistrate)/ Executive Magistrate/ Extra Assistant.
 - II. Chief Presidency Magistrate/ Additional Chief Presidency Magistrate/ Presidency Magistrate.
 - III. Revenue Officer not below the rank of Tehsildar.
 - IV. Administrator/ Secretary to Administration/ Development Officer. (Lakshadweep and Minicoy Islands)
10. Certificates (Refer Annexure) for Physically Challenged (PH) Candidates: A candidate seeking admission under the physically challenged (PH) category is required to bring original and photo copy of the certificate of Physical Disability issued by Chief Medical Officer of a district/ civil surgeon or any Government Hospital authorized to issue such certificates under the provisions of PWD Act 1995.
11. Affidavit (In case of change of name after marriage).
12. Undertaking for anti ragging as per the format from self and parent as per the direction of Hon'ble Supreme Court of India.
13. For Defence Category (CW) following priority will be used for admission (Refer Annexure):
 - Priority I - Widows/wards of Defence Personnel/Para-Military Personnel killed in action. Required Certificate: Proof in Original.
 - Priority II - Wards of serving Defence personnel and ex-servicemen/Para-Military Personnel disabled in action. Required Certificate: Original disability certificate clearly indicating the disability is attributable to Military Services.
 - Priority III - Widows/wards of Defence Personnel/Para-Military Personnel who died in peace time with death attributable to Military Service. Required Certificate: Original death certificate clearly indicating the cause of death is attributable to Military Services.
 - Priority IV - Wards of Defence Personnel/Para-Military Personnel disabled in peace time with disability attributable to Military Service. Required Certificate: Original disability certificate clearly indicating the disability is attributable to Military Services.
 - Priority V - Wards of serving Defence Personnel and ex-servicemen para-Military / police personnel who are in receipt of Gallantry Awards.
 - Priority VI – Wards of Defence Ex-servicemen. Required Certificate: Original ex-servicemen Identity Card/discharge book/PPO (Pension Payment Order).
 - Priority VII – Wards of Serving Defence personnel. Required Certificate: Original Service Identity Card and Dependent Card/ Certificate issued by the Competent Authority.

14. Medical fitness certificate in original in case of General/SC/ST/DP/OBC/PH.
15. Applicants NOC from the current employer (Refer Annexure).
16. Undertaking cum Declaration by parent(s) of candidate for OBC(NCL) category.
Refer Annex.H

Important Note:

1. Those candidates who are seeking provisional admission due to non-declaration of their final year/final semester result, will however have to provide proof of having passed all papers in all the previous examination along with final result by **30th September 2018** to the University otherwise their admission will be treated as null and void (cancelled) and the entire fee will be forfeited.
2. The proforma for various certificates are available in prospectus as igdtuwadmission.nic.in.
3. The documents mentioned in undertaking form submitted by applicant need to be submitted by **1st August 2018**.
4. The withdrawal form should to be submitted **to Ms. Neeta Sharma, PS to Dean (Academic Affairs), 3rd Floor, Computer center Block, above the Library.**

Admission Officer

CERTIFICATE OF CASTE

(to be submitted by Scheduled Castes/Scheduled Tribes candidates only)

Certified that Ms. _____,
daughter of Shri _____,
resident of _____, District _____, is a member of
the Scheduled Castes/Tribes and belongs to _____
caste/tribe which has been recognized as a Scheduled Caste/Tribe vide notification
No. _____ dated _____ issued by
Government of _____ (State).

Date

Seal

Signature of the Revenue Officer of the District concerned,

not below the rank of Tehsildar.

Note: Certificate, if issued by other than authority mentioned, notification of Government must be included.

CERTIFICATE OF BELONGING TO OBC-NCL

Dispatch No. _____ Dated _____

Certified that _____

Daughter of Shri _____ belongs to _____ Caste which falls in the category of backward class in accordance with the latest _____(State) Govt. Circular No. _____ dated _____ issued by _____(authority).

Name of the Certifying Officer

Designation _____

Signature of the S.D.M./Tehsildar

(with office seal)



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MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical Degree)
(TO BE SUBMITTED AT THE TIME OF ADMISSION)

I certify that I have carefully examined Ms. _____
daughter of Shri _____ whose
signature is given below. Based on the examination, I certify that she is in good mental and
physical health and is free from any physical defects which may interfere with her studies
including the active outdoor duties required of a professional.

Marks of Identification _____

Signature of the Candidate _____

Place:
Date:
Officer

Name & signature of the Medical

number

Seal and registration

ANNEXURE D

AFFIDAVIT BY THE STUDENT

I,.....(full name of student with admission/ registration/enrolment number) S/o D/o Mr./Mrs./Ms....., having been admitted to(name of the institution)....., have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations"), carefully read and fully understood the provisions contained in the said Regulations.

- 2). I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
- 3). I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case. I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 4). I hereby solemnly aver and undertake that
 - a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
 - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
- 5). I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 6). I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.

Declared thisday ofmonth of.....year.

Signature of deponent

Name:

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at.....(place).....on this the(day).....of.....(month).....(year).....

Signature of deponent

Solemnly affirmed and signed in my presence on this the (day) of (month), (year) after reading the contents of this affidavit.

OATH COMMISSIONER

(On Non-Judicial Stamp Paper of Rs. 10/-)

CERTIFICATE IN RESPECT OF DEFENCE CATEGORY (CW)

CERTIFICATE FOR AVAILING ADMISSION AGAINST DEFENCE QUOTA

OFFICE OF THE ZILA/RAJYA SAINIK BOARD

This is to certify that Msdaughter of
.....resident of, the above named officer/
JOO / OR pertains to the category marked below:- (Select one from below)

- (a) Killed in Action onduring.....
- (b) Disabled in Action on during.....
- (c) Died in peace time onwith death attributable to military service
- (d) Disabled in peace time with disability attributable military service.
- (e) Gallantry Award Winner (.....)
- (f) Ex-Serviceman.
- (g) Serving Soldier

(Category _____ above)

Ms daughter of the above named officer/JOO/OR is eligible for Admission in IGDTUW against the Defence quota under priority

Her Ex-Serviceman Widow Identity Card No. is DLH-01.....

NO./

(Round stamp of Office)

RSB SECRETARY

(Zila/RajyaSainik Board)

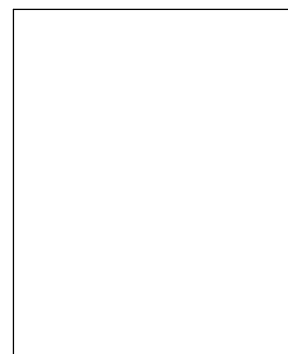
CERTIFICATE FOR DIFFERENTLY ABLED PERSON (PD)

To be issued by Medical Board from Government Hospital

1. Name of the candidate: Ms. _____

2. Father's Name: _____

3. Permanent Address: _____



4. Percentage loss of earning capacity (in words):

5. Whether the candidate is otherwise able to carry on the studies and perform the duties of an engineer/architect satisfactorily: _____

6. Name of the disease causing handicap: _____

7. Whether handicap is temporary or permanent: _____

8. Whether handicap is progressive or non-progressive : _____

9. The candidate is FIT / UNFIT to pursue the engineering studies.

10. (Strike out whichever is not applicable)

Member
(Orthopaedic Specialist)

Member

Principal Medical Officer

Date:

Seal of Office

NOTE:

1. The medical board must have one orthopaedic specialist as its member.

2. Candidate having temporary or progressive handicap will not be considered against these seats.



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FORM FOR WITHDRAWAL OF ADMISSION

- 1). Programme _____
- 2). Name of Student _____
- 3). Parent /Guardian's Nam _____
- 4). Address _____
- 5).Telephone _____
- 6). Mobile _____
- 7). Email address _____
- 8). Admission Number _____
- 9). Bank Details

- Name & Relationship of the concerned in favour of whom bank transfer is to be made _____
- Bank Detail of above concerned to be furnished in the given format:

Name of the Bank	Address of the Bank	Complete Bank Account No.	IFSC CODE OF THE BANK

UNDERTAKING

We understand and know the refund rules of the University & agree to abide by the same and we further understand that the refund would be made in due course of time through bank transfer only asper above request.

(Signature of Parent/Guardian)

Date:

(Signature of Student)

Date:

Compulsory Encl.:

1. Admission Slip issued at the time of Admission/Counselling in ORIGINAL
2. Cancelled cheque of CBS Bank branch, showing the detail of full bank A/cNo.;IFSCcode; beneficiary name etc. must be attached by the concerned student along with the Withdrawal Form

Refund amount will directly be transferred in the bank account submitted by the student through electronic mode (ECS/RTGS/ NEFT). Therefore, student may ensure to provide correct details under S.No. 8 &9 and the required enclosures. University will not be liable for any wrong transfer of amount on account of incorrect bank information provided by the student.

UNDERTAKING CUM DECLARATION TO BE GIVEN BY PARENT(S)
OF CANDIDATES FOR OBC(NCL) CATEGORY

(An affidavit to be produced on Rs. 100/- stamp paper)

TO WHOMSOEVER IT MAY CONCERN

I, Mr./Ms..... (father/mother) ofhaving Application. No.resident of village/town/city_____ district _____ State hereby declare that my ward belongs to the _____ (community) which is recognized as a backward class by the Government of Delhi for the purpose of reservation in PG./Ph.D Admissions 2018 of IGDTUW Delhi. I hereby undertake and state that the OBC(NCL) certificate provided by my ward for claiming reservation under OBC (NCL) category fulfils the eligibility conditions for OBC(NCL) as per the admission norms of PG./PH.D admissions, 2018.

I declare that total family income of candidate (including income from all the sources) is fall under eligibility of NCL-OBC for the financial year 2017-18.My family details are given as under for further verification

S.No	Name	Occupation	Organisation	PAN No.
1.				
2.				
3.	List other source of income (if any)			

I hereby declare that the above information provided by me is true to the best of my knowledge.

If any discrepancy is found in the details, PG./Ph.D admission Committee has all rights to cancel admission of my ward and legal action may be taken as per norms.

Place :

Date :

Name & Signature of Candidate

Name & Signature of Parent

NO OBJECTION CERTIFICATE

This is to certify that Ms. _____
D/o. _____ working
as _____
_____ in the department of _____
from _____ to _____ is an employee of our
department/organization. Her total work experience is _____ Years and
_____ Months. We have no objection to her joining in M.Tech. (Part-Time
time)/Ph.D (Part-Time) Degree course. She will be relieved from her duties as
per the requirements of her Degree Programme