



GURU GOBIND SINGH
INDRAPRASTHA
UNIVERSITY

Estate & Security Branch
Guru Gobind Singh Indraprastha University
Sector 16-C, Dwarka, Delhi-110078

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F. No.: GGSIPU/E&S/2013/602

Dated: 29th May, 2013

CIRCULAR

As decided in the meeting chaired by Hon'ble Vice Chancellor, the service provider such as food, milk, catering etc. and workers deployed in the Mess of Boys Hostel, Girls Hostel, Canteen, Staff quarters, USS and Civil Works are entering in the University campus for which the details are required for verification.

All the Concerned Departments/ Schools/ Service providers /Service users/ Concerned Contractors are requested to provide the details of Workers / Service providers latest by 07.06.2013 in the prescribed format (attached) in Estate & Security Branch.

(Sumar Singh)

Assistant Registrar (Security)

Copy to:-

1. Dean- USAP, USBT, USBAS, USCT, USET, USEM, USHSS, USICT, USL&LS, USMS, USMC, USMPMHS
2. Director- Academic Affairs, Coordination, CDMS, International Affairs, Legal Aid Cell, Organization & Development, Project Monitoring cell, Research & Consultancy, Student Welfare
3. Registrar, GGSIPU
4. Controller of Finance, GGSIPU
5. Controller of Examination, GGSIPU
6. Librarian, GGSIPU
7. Chief Warden, GGSIPU
8. Superintending Engineer, UWD
9. Chairman, UCITIM- with request to upload the circular on the University website.
10. In - Charge – Academic, Affiliation, Coordination, General Administration, Personnel, Planning (RTI & Legal), Purchase, Store.
11. Warden, Boys Hostel
12. Warden, Girls Hostel
13. AR to VC Secretariat - for kind information of Hon'ble Vice Chancellor
14. Office Copy

VERIFICATION FORM
GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

1. Name of the Employee/ Worker (Staff deployed through outsourcing Agencies)

2. Father's Name _____

3. Mother's Name _____

4. Place & Date of Birth _____

5. Language spoken _____

6. Phone / Mobile No. _____

7. Permanent Address

_____ Vill. _____

PO _____ P.S _____ District _____

State _____ Country _____ Tel. _____

8. Details of identification proof like Ration Card/Driving License or any ID Card issued by Government (Enclose copy)

9. Local Address

10. Nature of Work Assigned _____

11. Name of Employer / Contractor with Ph. /Mob. No.

12. Date since when employed in GGSIPU

13. Name of Concerned Department/ Person with address

Photograph of
Employee

Signature of Employer/Contractor

Signature of the Employee