# UNIVERSITY SCHOOL OF FIRE & INDUSTRIAL SAFETY

## GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

SECTOR 16 C, DWARKA, NEW DELHI-110078

Email: dean.usfis@ipu.ac.in

GGSIPU/USFIS/2024/34

Date: 30th July 2024

#### **NOTIFICATION**

### Schedule for Interview for PG Diploma in Fire & Life Safety Audit (CET Code 173) during Academic Session 2024-25

Dates	Time
1 <sup>st</sup> August 2024	11: 40 AM onwards (as per the list attached)

Interview link: https://meet.google.com/qro-wkeu-vwg

## Information & Documents required to be submitted at the time of Counselling:

- 1. Admission Verification Form (Format attached but to be submitted at the time of Counselling for seat allotment, if shortlisted, while verification of Original Documents)
- 2. Provisional Certificate/ Degree/ Marksheet
- 3. NOC from present employer and Professional Experience Certificate
- 4. Character Certificate
- 5. Reservation Certificate: Candidates wish to claim seat in Reserve Category may please refer to the Admission Brochure 2024-25.
- 6. Medical Certificate: Certificate of medical fitness, signed by a Registered Medical Practitioner holding a medical degree (Format attached).

#### Note:

- 1. Detailed list of shortlisted applicants for interview is enclosed.
- 2. The original documents (Except Medical Certificate and Character Certificate) shall be returned to the candidates after verification and the candidates shall be required to submit self attested photocopy of such documents at the time of Counseling for seat allotment, if shortlisted.
- 3. For seeking admission in PGD (Fire & Life Safety Audit) Part Time Programme, Eligibility Criteria mentioned in Admission Brochure 2024-25 may be referred, available at www.ipu.ac.in.

For any query, please contact the undersigned.

Prof Gagan Deep Sharma)
Project Incharge, USFIS



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#### List of shortlisted candidates

S. No.	Names	Time slots
1	Ashutosh Sharma	11:40-11:45 AM
2	Dilbag Singh	11:45- 11:50 AM
3	Parvinder Kumar	11:50- 12:00 Noon
4	Rudrakumar Rameshchandra Pandey	12:00- 12:05 PM
5	Tusar Phogat	12:05-12:10 PM
6	Sachin singh	12:10- 12:15 PM
7	Shahnawaz Rampuri	12:15- 12:20 PM
8	Shraddhey Dhimole	12:20- 12:30 PM





# GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY (A State University established by the Govt. of NCT of Delhi)



# ADMISSION VERIFICATION FORM FOR THE ACADEMIC SESSION 2024-25

Name of Candidate: (Mr./Miss/Mrs.)	
Father's/ Guardian's Name: (Mr./ Shri)	
Address:	
Address:	e No
Email:  Minority Community (If applicable) (Sikh / Muslim / Jain / Chri	
Minority Community (If applicable) (Sikh / Muslim / Jain / Chri	stian)
NLT/CET/COET Application NoCategory (3C/31/OBC/DC	ichori w Dikasilini wilgianorumy)
NLT/CET/CUET RankProgramme	·
	(5.0) (6.1) (5.0)
1. School / College location of qualifying examination	(Delhi / Outside Delhi)
2. Date of Birth Age as on 1-8-2024: years months	_days
(As per Secondary School Certificate)	
3. Passed Senior Secondary Examination / Three year Diploma in Engg/B Sc Gradu	lation (3 yrs)
4. Aggregate percentage of all subjects in Sr. Secondary Examination/Dip. in Engg	/ B Sc Graduation (3 yrs)
5. Passed in English in 12th Class (Yes/No)	
6. PCM/PCBM Percentage in 12th Class	
7. Percentage in qualifying degree as per the eligibility condition specified in PART	Γ A of the Admission Brochure:
8. Passed in Maths / Computer Science / Computer Applications in 12th Class	
9. Category Certificate SC/ST/OBC/PWD/Defence/Kashmiri Migrants/Minority Co	mmunity (Attach photocopy):
10. Character Certificate (Attach photocopy) (Yes/No)	
11. Medical Certificate (Attach Original) (Yes/No)	
12. Passed Graduation in the yearPercentage of marks in grad	luation
13. Passed Post-Graduation in the yearPercentage of marks in post	t-graduation
14. (a) CAT/CMAT/CET Score/Rank	
(b) Year of Passing	
15. Details of Demand Draft(s) for Submission of fees	
Amt:         DD No.         Bank/Branch           Amt:         DD No.         Bank/Branch	
Amt: DD No. Bank/Branch	
Amt:DD NoBank/Branch	
I solemnly affirm that the information furnished above is true and correct in	n all respects. I have not concealed any
information. I realize that if any information furnished herein is found to be incor	rect or untrue, I shall be liable to criminal
prosecution and also forgo my claim to the seat in the college. Further, that my	candidature for examination/selection and
admission to the course is liable to be cancelled. I agree to abide by the rules & re-	gulations of the University.
Signature of the Parent/Guardian & Date	Signature of Candidate & Date
FOR OFFICE USE ONLY	
Certificates Checked and Verified by University official/Officer during counselling	.g:
Signature of the Deputed Officers/Officials	
Name of the Officer/Officials	