

Guru Gobind Singh Indraprastha University

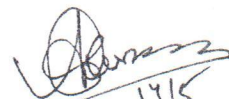
Dwarka Campus, Sec-16C, Dwarka, New Delhi-75
(General Administration Branch)

Dated: 14-05-2012

CIRCULAR


The competent authority has decided to issue a paper Identity cards to short term contractual employee. Such cards shall be issued by Dean/Director/HOD where the said employee is working. The approved Identity card format for contractual employees is enclosed. The same can also be downloaded from the University website.

This issues with the approval of the competent authority.


(A.K. Verma)
Joint Registrar (GA)

Copy to:-

1. Dean USBT
2. Dean USIT
3. Dean USLLS
4. Dean USMS
5. Dean USBAS
6. Dean USAP
7. Dean USEM
8. Dean USHSS
9. Dean USCT
10. Dean USE
11. Dean USMC
12. Director Research & Consultancy
13. Director Centre for Disaster Management Studies
14. Director Legal Aid Cell
15. Director Organisation & Development
16. Director Academic Affairs
17. Director Project Monitoring Cell
18. Director International Affairs
19. Director Students Welfare
20. Principal IGIT
21. Controller of Finance
22. Controller of Examination
23. Librarian
24. Chief Engineer
25. Chief warden
26. General Admin. Branch
27. JR (Affiliation)
28. JR (Academic)
29. JR (Co-ordination)
30. AR (Store)
31. DR (Planning)
32. Inchg. (Pers.)
33. AR (Purchase)
34. AR (GA, IGIT)
35. AR (E & S) to inform the security staff about the same.
36. Staff Development Cell
37. Chairman UCITIM (with request to upload the same on University website)
38. PRO
39. Warden Boys Hostel
40. Warden Girls Hostel (K. Gate campus)
41. Warden Girls Hostel (Dwarka campus)
42. Dispensary
43. AR Hon'ble VC
44. PS to Registrar


(A.K. Verma)
Joint Registrar (GA)

Diary No. 262-14/5/12
Date 14/5/12



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

Sector-16C, Dwarka, New Delhi-110 075

University Identity Card for Contract Employee

(To be issued by Dean/Director/HOD)

1. Name Of Employee : _____
(in capital letters)
2. Father/Husband's Name: _____
3. Designation: _____
4. Employee Code: _____
5. Nature of Appointment: Contractual
6. Posting (Department/School) : _____
7. Date of Birth: _____
8. Date of Issue of Identity Card: _____
9. Validity of Identity Card: _____
(To be in consonance with letter/order from Personnel Deptt.)
(DD/MM/YYYY)
10. Residential Address : _____

11. Phone No. (off.) _____ (Res.) _____ (Mob.) _____
12. Blood Group: _____
13. Mark of Identification: _____
14. Name of Person & Phone No. _____
to be contacted in case of Emergency: _____

Paste here recent
passport size
photograph
(duly attested by
Dean/Director/HOD)

Signature of Employee
(with date)

Signature of Dean/Director/HOD *
with date & seal

* Note: Dean/Director/HOD to kindly ensure to take back this identity Card from the contractual employee in case:
i) a new I - Card is issued due to renewal of contract.
ii) when contract terminate.