GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY
NEW DELHI

Directorate of Students' Welfare
Guru Gobind Singh Indraprastha University
(A State University established by the Government of NCT of Delhi)
Sector 16-C, Dwarka, New Delhi 110078
Ph. No. 011 25302802 E-Mail: sports@ipu.ac.in

F. No. 36(2)(5)(25)/2024/DSW/630 Dated: 12 November 2026

NOTICE

Sub: GGSIP University Team for AIU North Zone Inter-University Men's Kabaddi Championship

The following students have been provisionally selected to represent the Guru Gobind Singh Indraprastha University in the AIU North Zone Inter-University Men's Kabaddi Championship, scheduled to be held at Chaudhary Ranbir Singh University, Jind from 25th to 28th November 2026:

S. No.	Name	Institute	Enrolment No.
1.	Abhijeet Rawat	USMS	51416601724
2.	Aman Gupta	DBIT	05619501724
3.	Aman Kumar	USMS	02916601724
4.	Aryan Kumar Sharma	MBS College	131261015038
5.	Dhruv	VIPS-TC	13217711625
6.	Golu Garasiya	BPIT	51820803124
7.	Keshav Arya	TIAS	04417001725
8.	Manish	MSIT	65215002724
9.	Shivam Singh Rawat	USCT	02516101423
10.	Shiwanshu Kumar Singh	VIPS-TC	06117711924
11.	Vansh Joshi	ADGIPS	01015611123
12.	Vishal Kumar	VIPS-TC	07017711623
13.	Vishu	USAR	08219051624
14.	Shiva Yadav	BLMCE	06155602125

All the aforementioned students are hereby directed to report at the Directorate of Students' Welfare, GGSIPU, Dwarka Campus, on 13th November 2026 at 14:30 hrs., along with the documents mentioned in Annexure–1. Failure to report with the requisite documents shall be construed as unwillingness to participate, and their selection shall be deemed withdrawn/cancelled without any further notice.

Meenu Kapoor

(Prof. Meenu Kapoor)
Director, SW

Copy to:

1. Dean/Director of concerned USS/Centre, GGSIPU – for information and necessary action
2. Directors/Principals of concerned Affiliated Institutes, GGSIPU – for information and necessary action
3. Project Director, UITS, GGSIPU – with a request to upload notice on the university website
4. Dy. Registrar, Security & Sanitation Branch, GGSIPU – for information and necessary action
5. AR to Vice Chancellor, GGSIPU – for kind information of Hon'ble Vice Chancellor, GGSIPU
6. AR to Registrar, GGSIPU – for kind information of Worthy Registrar, GGSIPU
7. Guard file

(Mahesh Kumar Hooda)
Sports Officer, SW

Annexure – 1

List of Documents to be Submitted for the AIU Championship

S. No.	Course	Required Documents (S. No.)
1	For 1st Year UG course students	1, 2, 3, 4, 5, 6, 7, 8, 9, 12, 13, 14, 15, 16, 17
2	For other UG course students	1, 2, 3, 4, 5, 9, 12, 13, 14, 15, 16, 17
3	For 1st Year PG course students	1, 2, 4, 5, 6, 7, 8, 9, 10, 12, 13, 14, 15, 16, 17
4	For other PG course students	1, 2, 4, 5, 9, 10, 11, 12, 13, 14, 15, 16, 17
5	For 1st Year UG/PG course students who obtained a diploma/degree from another Board/University	1, 2, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17
6	For Other UG/PG course students who obtained a degree/diploma from another University/Board	1, 2, 4, 9, 10, 11, 12, 13, 14, 15, 16, 17

Original and one (1) self-attested photocopy of the following:

1. Certificate of Secondary School Examination/equivalent
2. Certificate of Senior Secondary School Examination/equivalent
3. Migration Certificate of the last attended school/institute board
4. Gap Year Affidavit, if applicable
5. Re-Admission Letter, if applicable
6. Provisional Admission Letter
7. Reporting/Admission Slip
8. Fee Payment Receipt
9. Grade Sheet / Marks Card / DMC / Valid Result of UG course of all semesters
10. Migration Certificate of last attended University
11. Grade Sheet / Marks Card / DMC / Valid Result of PG course of all semesters
12. Academic Bank of Credit (ABC ID)
13. College/Institute ID
14. Valid Aadhaar Card

Following in original:

15. Medical Certificate
16. Undertaking/Declaration
17. Three (3) Passport Size Photographs

Medical Certificate

Name of Student/Player	
Father's Name	
Address	
Name of the School/Institute/College	
Age with Date of Birth	
Height	
Weight	
Eye Sight	
Any Other Disease	

It is certified that _____ is medically fit/unfit for appearing in the games/competition.

_____

Signature of Doctor/Chief Medical Officer with Rubber Stamp
(Regd. No)

Undertaking / Declaration

I, _____, son/daughter of _____, have been provisionally selected to represent the Guru Gobind Singh Indraprastha University (GGSIPU) in the AIU North Zone Inter-University Men's Kabaddi Championship to be organised by Chaudhary Ranbir Singh University, Jind from 25th to 28th November 2026.

I/we hereby solemnly declare and undertake that:

1. I shall abide by all the rules, regulations, and instructions issued by the GGSIPU, the Association of Indian Universities (AIU), the Host University, the Organizing Committee, the coach, and the team manager during training camp, journey, stay, and competition, failing which I shall be liable for disciplinary action as deemed fit by the University.
2. I shall maintain strict discipline, decorum, and good conduct during the training camp, journey, stay, and throughout the competition.
3. I shall accept all decisions taken by the GGSIPU and the coach/manager in case of any dispute or disciplinary issue.
4. GGSIPU, its officials, the coach, and the manager shall not be held responsible for any accident, injury, illness, loss, damage, or mishap occurring during training camp, journey, stay, or competition, and all medical expenses or other liabilities arising from any such incident shall be borne solely by me/my parent/guardian.
5. I undertake to indemnify and keep indemnified GGSIPU, its officials, coach, and manager from and against any claims, fine, penalty, demands, liabilities, or legal proceedings that may arise out of my participation in the said event.
6. I am physically fit to participate in the championship, and it is my personal/parent's/guardian's responsibility to ensure adequate medical fitness and insurance coverage, if deemed necessary.

Signature of Participant

Name: _____

Institute Name: _____

Enrolment No.: _____

Tel. No.: _____

E-mail: _____

Signature of Parent (Father/Mother/Guardian)

Name: _____

Tel. No.: _____

E-mail: _____

To be Signed by Concerned USS/Affiliated Institute

I hereby certify that _____, Enrolment No. _____ is studying in _____ course in _____ semester in USS/Centre /Affiliated Institute, and was admitted to the said course on _____ (DD/MM/YYYY). The duration of the said course is _____ years. I have No Objection in his/her participation in the aforesaid competition.

Signature
Dean/Director (of USS/Centre only)
Director/Principal of Affiliated Institute
With Designation Stamp

To,
The Director, Students' Welfare
GGSIP University, Delhi