



**DEPARTMENT OF STUDENTS' WELFARE &
NATIONAL SERVICE SCHEME CELL
S.N.D.T. Women's University, Mumbai**



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Ref.No.DSW-NSS/2013-14/

January 7, 2014

To,
The Principal
All the Colleges conducted by and
Affiliated to SNDT Women's University
Having NSS Units.

Sub: - Participation in National Integration Camp for Women

Dear Sir/Madam,

All the NSS Units informed to refer the attached circular dated 03.01.2014 send the filled form and list of the Volunteers to this office by latest 11/01/2014. The list of the selected Volunteers will be displayed on University Website.

Thanking you,

Yours Sincerely,

Sd/-
(Mr. Vinod Zalte)
NSS Coordinator

Encl: - Regional Center letter and forms

भारत सरकार
युवा कार्यक्रम और खेल मंत्रालय
GOVERNMENT OF INDIA
MINISTRY OF YOUTH AFFAIRS & SPORTS

Grams : " RASHTRIYASEVA "
Tele-Fax : 91- 080 -26563530
E-mail : bangalore-nss@nic.in

स.से.यो. क्षेत्रीय केन्द्र
NSS REGIONAL CENTRE
57/190, R. V. ROAD
BASAVANGUDI
BANGALORE - 560 004

No.F.22/NSS/NIC/KSWUB/2013-2014/664-674

03.01.2014

To
The APA/YOs of NSS Regional Centres of
Kolkata, Patna, Hyderabad, Pune, Trivandrum

Sir,

Sub: National Integration Camp for Women by Karnataka State
Women's University, Bijapur (Karnataka) from 30.01.2014
to 05.02.2014 (07 days) – Deputation Of Female NSS
Volunteers – reg.

Ref : 1. P.A.C. N.Delhi letter F.No. 9-1/NSS/PAC/2013/1591-1605
dated 08-11-2013

2. Lr. No. KSWUB/NSS/2013-14/78 dt. 07.12.2013 from NSSPC.,
K.S.W.U., Bijapur

I am to refer to the subject cited above and by direction happy to inform you that Government of Karnataka sanctioned 10 N.I. Camps to the State Liaison Cell, NSS during 2013-2014.. These camps will be organized in collaboration with this Office and Universities/Directorates in Karnataka during 2013-2014 at various places in Karnataka. The **SIXTH** N.I. Camp for Women is being conducted by SLO CELL, GOK in collaboration with Karnataka State Women's University, Bijapur (Karnataka) **from 30.01.2014 to 05.02.2014 at its University Campus**

In this regard, you are requested to **depute the Female NSS volunteers** as mentioned below who are talented, active and can involve in all the activities to participate in the camp.

Sl.No	State	NSS Regional Centre	NSS Vol	NSS PO
01	West Bengal	Kolkata	10 Female vols	01 (Female)
02	Bihar	Patna	10 Female Vols	01 (Female)
03	Andhra Pradesh	Hyderabad	10 Female vols	01 (Female)
04	Maharashtra	Pune	10 Female Vols	01 (Female)
05	Kerala	Trivandrum	10 Female vols	01 (Female)
TOTAL			50 Female vol	05 (Female)

Free Boarding and Lodging will be provided by the Host University. To & Fro 2nd Class Train Fare/Bus Fare **WILL BE REIMBURSED** on production of tickets by the organizers.

....2/-

-2-

Bijapur is well connected by Train/Bus. The participants may reach Bijapur as follows and report to the NSS Prog. Co-ordinator by 29th January evening or 30th January morning. They will be free to leave on the evening of 05th February 2014.

Patna)(
Kolkata)(Hyderabad - Gulbarga - Solapur - Bijapur
Hyderabad)(

Trivandrum)(Bangalore - Gulbarga -- Solapur - Bijapur OR
(Bangalore - Hubli -- Bijapur

Confirmation along with list of participants may be directly sent to the organizer as given below with a copy endorsed to this office at the earliest.

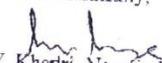
Dr. R.V. Gangashetty
NSS Programme Co-ordinator
Karnataka State Women's University
"Jnanashakti Campus"
Athini Road,
BIJAPUR - 586 108
(Karnataka)

Tele Fax: (08352) - 229293
Mob: 9448504947
E-Mail: rvgshetty@gmail.com
nsskswub@gmail.com

Participants are advised to bring with them traditional costumes, Dresses for cultural item, Identity Card, Bio-data, College/University Banner along with light bedding.

Kindly confirm participation of your volunteers.

Yours faithfully,


(K.V. Khadri, Narasimharah)
Youth Officer & HOO

CC:-

1. Principal Secretary, Youth Services Department, GOK, M.S. Buildings, Bangalore - 560 001 - for kind information
2. The Joint Secretary, (NSS), Ministry of Youth Affairs & Sports, Shastry Bhavan, New Delhi-110 001 - for information
3. Shri R.K. Singh, Under Secretary, (NSS) M.Y/A & S, Shastry Bhavan, New Delhi -1 - for kind information.
4. Shri S.K. Sawhney, DPA, PAC, NSS, Jam Nagar House, N.Delhi-110 011 - for kind information.
5. Dr. B. Dhananjaya, State Liaison Officer, NSS, Y/S Department, GOK, M.S. Buildings, Bangalore - 1 - for kind information
6. Dr. R.V. Ganga Shetty, NSS Programme Co-ordinator, Karnataka State Women's University, Jnana Shakthi Campus, Athini Road, Bijapur-586 108 - for information

BIODATA OF PARTICIPANT

NATIONAL INTEGRATION CAMP	
A: PERSONAL DETAILS (in capital letters)	
Name: Mr/Ms : _____ <div style="display: flex; justify-content: space-around; width: 100%;">(Surname)(First name)</div>	Paste Passport Size Photograph here
Father's Name : _____	
NSS Volunteer / NSS Prog Officer : _____	
Date of birth : _____ Male / Female: _____	
Class Studying in : _____ Whether SC/ST/OBC/GEN: _____	
University/+2 : _____ State/U.T.: _____	
B: CONTACT DETAILS	
College /Institution Name & Address: Telephone No : Fax No : E mail ID :	Residential/ Permanent Address: Telephone No : Mobile No : E mail ID:
C: OTHER DETAILS	
(i) Food habit: Veg / Non-Veg: _____ (ii) NSS Camps attended: _____	(iii) NSS Enrollment Year: _____ (iv) No of years completed in NSS: _____
Signature of the NSS Volunteer	Signature of the NSS Programme Officer

Certificate of Medical / Physical Fitness – A Specimen

Signature of the Candidate.....

I do hereby certify that I have examined Mr./Ms.....
S/o/D/o..... and found fit for undergoing rigorous training for
National Integration Camp/ Pre-Republic Day/Republic Day Camp/Adventure Camp/NSS
Mega Summer Camp

The candidate whose signatures are given above is not suffering any
communicable or chronic disease, which may cause any hindrance in his/her participation
in the above-mentioned rigorous training programme.

Station:

Dated:

Signature of the Medical Officer
with Seal

Form of Indemnity – A Specimen

In consideration of my being nominated at my request to undergo all types of training and also participating in any camp/course/adventure training activities in/outside NSS and traveling I undertake and agree that neither I nor my executer/ administrator will make any claim against the Government of India or against any officer of NSS/Principal/ Programme Officer/ Programme Coordinator/State Liaison Officer/Youth Officer/ Assistant Programme Adviser/Deputy Programme Adviser/ Programme Adviser in respect of any loss or injury to the property or person (including injury resulting in death), which may suffer while or in consequence of my being in training/ participating in any camp/course/adventure training activities in/ outside NSS and traveling and I understand that no compensation will be paid by Government of India or any Officer as mentioned against any such loss or injury (including injury resulting in death) and I agree so as to bind myself, executers and administrators to indemnity to the Government of India, any NSS official and any person in the service of Government of India, against any claim which may be made any third party against them or any of them arising out of any act or default on my part during or in connection of said National Integration Camp/training camp/course/NSS Pre-RD Parade/RD Parade Camp/NSS Mega Summer Camp/ adventure camp ,training and journey by road/rail/sea/river/flight.

**Signatures of the applicant
Signed by the applicant with address**

**In the presence of
Witness 1**

Witness 2

NB: One of the witnesses must be the parent/guardian of the NSS volunteer with address

NSS Volunteer ship Certificate – A Specimen

It is certified that Shri/Kum..... Son/Daughter of
Shri..... is a bonafide student of (name of
institution).....

He/She is a regular NSS volunteer from..... and has completed
his/her one year of volunteer ship and he/she is neither a member of NCC nor a member of
Scouts and Guides/ Rovers/Rangers.

**Signatures of the Programme Officer
with seal**

**Signatures of the Principal
with seal**

Note: Volunteer ship certificate should be on the letter head of the college/ Institution.

**LIST OF NSS VOLUNTEERS/PROGRAMME OFFICER
(CONTINGENT LEADER) IN NATIONAL INTEGRATION CAMP**

Sr.	Name of the NSS Volunteer/NSS PO with Mobile No.	Male/ Female	Date of Birth & Class Studying in	Name of the College with address ,Tel & Fax No	Name of the University/+2 level
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					

**NSS PROGRAMME COORDINATOR
UNIVERSITY**

