September 19, 2022

All Deans of Faculties / Heads of Departments / Directors of Centres
Jamia Millia Islamia
New Delhi – 110 025

Subject: Regarding enrolment of students in various Clubs of the Jamia Cultural Committee for the Academic Session 2022-23

Sir/Madam,

The Jamia Cultural Committee, comprising of several clubs, is constituted every year to facilitate the participation of students in various extra-curricular and cultural activities in the University as well as to represent Jamia Millia Islamia in competitions and events outside the University.

The Office of Dean, Students’ Welfare, JMI, has established the following clubs, which bonafide students may join:

- Debating Club
- Drama Club
- Literary Club
- Music Club
- Business Club
- Quiz Club

It is requested that you may kindly ask your office to display the poster, attached herewith, on Notice Boards for larger publicity of the information. Interested bonafide students may download the Enrolment Form from the Jamia Website http://jmi.ac.in.

Last date for submission of Enrolment is Date October 16, 2022

Yours sincerely,

[Signature]

(Prof. Ibraheem)
Dean, Students’ Welfare

Copy for information to:
1. The Secretary to the Vice-Chancellor, JMI
2. The Assistant Registrar, Registrar Secretariat, JMI
3. The Director, FTK-CIT (with a request to display the same on Jamia Website)
OFFICE OF THE DEAN, STUDENTS' WELFARE
JAMIA MILLIA ISLAMIA

ENROLMENT FORM FOR CULTURAL ACTIVITIES – 2022-23

Club: Debate / Literary / Business / Music* / Drama* / Quiz

Name of the Student: .................................................................

Student ID: ...........................................................................

Course / Class: ........................................................................

Faculty / Department / Centre: ................................................

Sex: Male/Female Date of Birth: .............................................. Age:

Telephone Number: Residence: Mobile: ................................

Email: .............................................................................. Blood Group

Father's Name: ........................................................................

Present Residential Address: ...................................................

Permanent Address: ..............................................................

* Payment of Rs. 250/- per month to be made in the office of DSW from 1-10 every month.

(Signature of the Dean/Head/Director) (Signature of the Applicant)