जामिया मिल्लिया इस्लामिया

(संसदीय अधिनियमानुसार केन्द्रीय विश्वविद्यालय) (नैक प्रत्यायित 'A ++ Grade'/एन.आई.आर.एफ. तीसरी रैंक) मौलाना मोहम्मद अली जौहर मार्ग, नई दिल्ली-110025 JAMIA MILLIA ISLAMIA

(A Central University by an Act of Parliament) (NAAC Accredited 'A++Grade'/NIRF 3rd Rank)

Maulana Mohammed Ali Jauhar Marg, New Delhi-110025

मोलाना मोहम्मद अला जाहर मार्ग, यह दिल्ला-170025 Maulana Monammed All Jamai Wang, 16w Behn 170025

Tel.: 011-26981717, 26988044, 26985175 Extn.: 1795, 1797 | E-mail: dgs@jmi.ac.in | Website: http://www.jmi.ac.in

खेल एवं क्रीड़ा विभाग

Games & Sports Department

شعبه کھیل کو د

F. No. 55/G&S/JMI/2024

January 14, 2025

CIRCULAR

This is to inform that the Competent Authority, JMI on the proposal of the Sports Committee, JMI held on 09.08.2024 has allowed the Ph.D. Scholars of JMI to avail the sports facilities (as per students timings) at NMAKP Sports Complex, JMI with a payment of an Annual Fee of Rs.2,000/-. A copy of Application Form for Ph.D. Scholars for the said purpose is enclosed herewith.

All the Deans/Heads/Directors are requested to kindly bring this information to the knowledge of the Ph.D. Scholars of your Faculty/ Department/Centre.

(Prof. Nafis Ahmad)

Hony. Director (Games & Sports)

Copy to:

- 1. All Deans/HoDs/Directors of JMI
- 2. The Dean, Students' Welfare, JMI
- 3. The Chairperson, Sports Committee, JMI
- 4. All Presidents of Games Club of JMI
- The Secretary to the Vice-Chancellor, JMI
- The Assistant Registrar, Registrar Secretariat, JMI
- 7. The Asstt. Finance Officer (Payment) with the request to kindly instruct the concerned to collect an Annual Fee of Rs.2,000/-from the Ph.D. Scholar under the budget head "University Games Fund (Deposit Account)" for the said purpose.
- Concerned File



GAMES & SPORTS DEPARTMENT JAMIA MILLIA ISLAMIA, NEW DELHI-110025

Affix Recent Passport Size Photograph

APPLICATION FORM for Ph.D. SCHOLARS

Otadont ID	Date of Admission:
Name of the Ph.D. Scholar (in Block Letter	rs):
Father's Name:	
Date of Birth: Gen	der: Nationality:
Name of the Supervisor:	
Name of the Department:	
Address for Correspondence:	
Contact No.: En	nail ID:
DECLARATION I hereby declare that the information given above is correct and I will abide by the rules & regulation of the N.M.A.K.P. Sports Complex notified from time to time.	
Date:	(Signature of the Ph.D. Scholar)
Note: Please attach self-attested photoco	
Note: Please attach self-attested photoco	py of the <u>Student ID Card</u> .
Note: Please attach self-attested photoco Certified that Mr./Ms	py of the <u>Student ID Card</u> . is a Ph.D. Scholar
Note: Please attach self-attested photoco Certified that Mr./Ms	py of the <u>Student ID Card</u> .
Note: Please attach self-attested photoco Certified that Mr./Ms of the Department	py of the <u>Student ID Card</u> . is a Ph.D. Scholar
Note: Please attach self-attested photoco Certified that Mr./Ms of the Department Signature of the Supervisor	py of the <u>Student ID Card</u> . is a Ph.D. Scholar Session
Note: Please attach self-attested photoco Certified that Mr./Ms of the Department Signature of the Supervisor Date:	py of the Student ID Card. is a Ph.D. Scholar Session. Signature of the Head with office seal
Note: Please attach self-attested photoco Certified that Mr./Ms of the Department Signature of the Supervisor Date:	py of the <u>Student ID Card</u> . is a Ph.D. Scholar Session
Note: Please attach self-attested photoco Certified that Mr./Ms of the Department Signature of the Supervisor Date: FOR OFF	py of the Student ID Card. is a Ph.D. Scholar Session. Signature of the Head with office seal

(Dealing Assistant)
Cash Section

(Office Incharge) Games & Sports (Director, Games & Sports)