

**Information for B.Tech. first semester student getting admission through Joint Seat Allocation Authority JOSAA 2015 through JEE Main/ DASA at IIT Allahabad and RGIIT Amethi (A Campus of IIT Allahabad) and IIT, Lucknow**

**Note:** All candidates who have been allotted IIT Allahabad, RGIIT Amethi campus or IIT Lucknow are required to report at IIT Allahabad Jhalwa Campus during the period as specified by JOSAA 2015/ DASA.

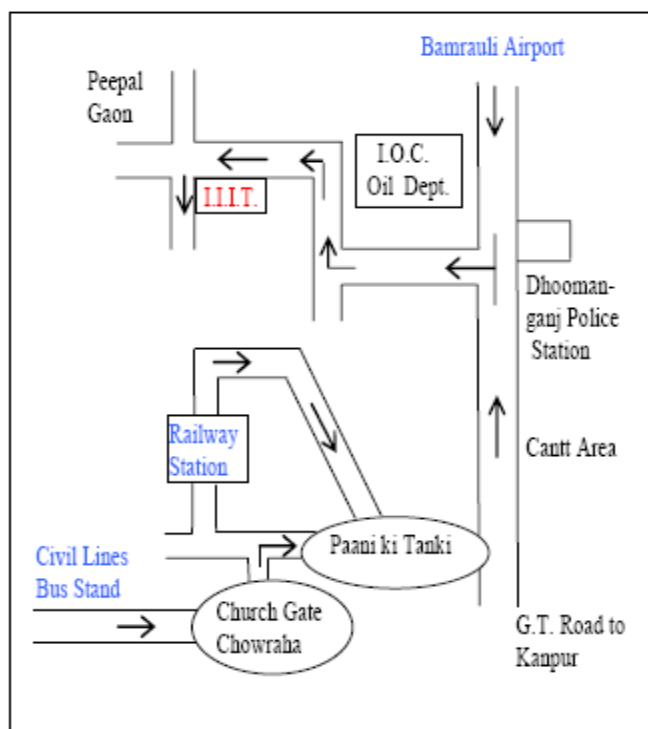
**Reporting Date: 23 July - 26 July, 2015**

**Commencement of Classes : July 27, 2015**

**How to reach:**

The IIT Allahabad campus is located at Deoghat Jhalwa (Peepalgaon Road), which is on the outskirts of Allahabad. It is 10 km from the town center and 7 km from the main railway station. Allahabad is very well connected by Trains as well as Air route from both Delhi as well as Kolkata. Railway services to this city from all mega cities of the country are excellent and quite comfortable. Best is to alight on Platform No. 1 site of Allahabad Junction and hire an auto rickshaw for about Rs. 70 – 100, depending upon day-night timings of your arrival.

**Guide Map for Reaching IIT Allahabad**



**Indian Institute of Information Technology Allahabad  
Deoghat, Jhalwa, Allahabad -211 012 (U.P.), INDIA**

**Documents to be brought by the selected candidates at the time of reporting to the Institute:**

**Candidates are required to bring the following documents (two sets of self-attested document with date and ORIGINAL DOCUMENTS for VERIFICATION) in the same sequence as given here below -**

- Provisional Seat Allocation Letter.
- Original Class X & XII Pass Certificate & Marksheet.
- Original Caste Certificate (if applicable, for SC/ST/OBC). OBC certificate must have been issued on or after 01/04/2014 as attached.
- Original Certificate of Persons with Disability ( for PWD Candidate)
- Original Transfer Certificate from last school/ college attended.
- Original Character Certificate from last school/ college attended or from any Gazetted Officer.
- Original JEE Main All India Rank/Score Card & Admit Card.
- Original JEE Main seat allotment letter as given by counseling centre & fee receipt.
- 5 Nos. coloured photo of good quality (passport size).
- Medical Report on JOSAA website.
- Character Certificate.
- Migration Certificate.
- Transfer Certificate.
- Fee Receipt
- **NECESSARILY bring two sets of self attested photocopy of above mentioned documents.**
- Anti-Ragging Affidavit by the student (submitted on a Non-Judicial stamp paper of Rs. 10/- duly authorized by the Oath Commissioner)
- Anti-Ragging Affidavit by the Parent/ Guardian (submitted on a Non-Judicial stamp paper of Rs. 10/- duly authorized by the Oath Commissioner)
- MCAIP Form for “Medical-cum-Accidental Insurance Benefit Scheme” has to be submitted in duplicate (will be provided at the time of admission).

Note:-

- All students are required to bring fee for 1<sup>st</sup> Semester as per the above fee structure after deduction of the amount deposited by them to JOSAA, as a part of Fee, which will be transferred to the Institute by JOSAA.
- Present Tuition fee for DASA student is US\$ 4000 per semester for NRI and US\$ 2000 for SAARC, all other fee dues are same as per the below fee structure.

**FEE STRUCTURE FOR B.TECH  
IIIT-ALLAHABAD & RGIIT-AMETHI**

Sl. No.	Items of Fee	B.Tech.							
		1st Sem.	2nd Sem	3rd Sem.	4th Sem.	5th Sem.	6th Sem.	7th sem.	8th Sem
<b>A</b>	<b><u>One Time FEE</u></b>								
	Admission Fee	2500							
	Enrolment Fee	1000							
	Identity Card Fee	1000							
	Alumni Fund	8000							
<b>B</b>	<b><u>Annual Dues</u></b>								
	Benevolend Fund	500		500		500		500	
	Gymkhana Fees	500	500	500	500	500	500	500	500
	Group Insurance and Student Welfare Fund	1000		1000		1000		1000	
	Library Fee	1000		1000		1000		1000	
<b>C</b>	<b><u>Semester Fees</u></b>								
	Tuition Fee	40000	40000	40000	40000	40000	40000	40000	40000
	Hostel rent (Double Occupancy Rs. 4500/- ) (Single Occupancy Rs. 9000/-)	4500	4500	4500	4500	4500	4500	4500	4500
	Examination Fee	1000	1000	1000	1000	1000	1000	1000	1000
	Grade Card Fee	500	500	500	500	500	500	500	500
	Medical Fee	500	500	500	500	500	500	500	500
	Mess Fee (Fee Calculated on exact no. of days basis 1 <sup>st</sup> semester Jul-Dec 2015) Mess for RGIIT Amethi Campus 1 <sup>st</sup> Sem Jul-Dec 2015 Rs. 12586/-	12860	12000	12000	12000	12000	12000	12000	12000
	<b>TOTAL</b>	<b>74860</b>	<b>59000</b>	<b>61500</b>	<b>59000</b>	<b>61500</b>	<b>59000</b>	<b>61500</b>	<b>59000</b>

(Combined DD for FEE and MESS will not be accepted)

**FEE STRUCTURE FOR FIVE YEAR B.TECH.-M.TECH COURSE  
IIIT-ALLAHABAD**

Sl. No.	Items of Fee	1st Year		2nd Year		3rd Year		4th Year		5th Year.	
		1st Sem.	2nd Sem	3rd Sem.	4th Sem.	5th Sem.	6th Sem.	7th sem.	8th Sem	9th sem.	10th Sem
<b>A</b>	<b><u>One Time FEE</u></b>										
	Admission Fee	2500									
	Enrolment Fee	1000									
	Identity Card Fee	1000									
	Alumni Fund	8000									
<b>B</b>	<b><u>Annual Dues</u></b>										
	Benevolent Fund	500		500		500		500		500	
	Gymkhana Fees	500	500	500	500	500	500	500	500	500	500
	Group Insurance and Student Welfare Fund	1000		1000		1000		1000		1000	
	Library Fee	1000		1000		1000		1000		1000	
<b>C</b>	<b><u>Semester Fees</u></b>										
	Tuition Fee	40000	40000	40000	40000	40000	40000	35000	35000	35000	35000
	*Hostel rent (Double Occupancy Rs. 4500/- ) (Single Occupancy Rs. 9000/-)	4500	4500	4500	4500	4500	4500	4500	4500	4500	4500
	Examination Fee	1000	1000	1000	1000	1000	1000	1000	1000	1000	1000
	Grade Card Fee	500	500	500	500	500	500	500	500	500	500
	Medical Fee	500	500	500	500	500	500	500	500	500	500
	*Mess Fee (Fee calculated on exact no. of days basis 1 <sup>st</sup> semester Jul-Dec 2015)	12860	12000	12000	12000	12000	12000	12000	12000	12000	12000
	<b>TOTAL</b>	<b>74860</b>	<b>59000</b>	<b>61500</b>	<b>59000</b>	<b>61500</b>	<b>59000</b>	<b>56500</b>	<b>54000</b>	<b>56500</b>	<b>54000</b>

(Combined DD for FEE and MESS will not be accepted)

Note:

- \* For Hostellers only
- Fee Structure for NRI/FN etc. students is governed separately as per GOI norms.

**IIT-ALLAHABAD**  
**DASA STUDENTS FEE STRUCTURE For B.Tech**

Sl. No.	Items of Fee	B.Tech. 1st Semester (Rs.)
A	<u>One Time FEE</u>	
	Admission Fee	2500
	Enrolment Fee	1000
	Identity Card Fee	1000
	Alumni Fund	8000
B	<u>Annual Dues</u>	
	Benevolent Fund	500
	Group Insurance and Student Welfare Fund	1000
	Library Fee	1000
C	<u>Semester Fees</u>	
	Hostel rent (Triple Occupancy Rs. 3500/-, Double Occupancy Rs. 4500/- & Single Occupancy Rs. 9000/-)	4500
	Gymkhana Fees	500
	Examination Fee	1000
	Grade Card Fee	500
	Medical Fee	500
	Mess Fee (Calculated on exact no. of days basis for Odd Semester Jul. - Dec. 2015)	12860
	<b>TOTAL in INR</b>	<b>34860</b>
	In addition to above as per DASA UG Admission Brochure 2015-16 B.Tech. Semester Tuition Fee in US\$ for FN/NRI	US\$4000
	In addition to above as per DASA UG Admission Brochure 2015-16 B.Tech. Semester Tuition Fee in US\$ for SAARC	US\$2000

**Documents to be brought by the selected candidates at the time of reporting to the Institute:**

- Printout of Provisional Admission Letter.
- Original Class X & XII Pass Certificate & Marksheet.
- Original Transfer Certificate from last school/ college attended.
- Original Character Certificate from last school/ college attended or from any Gazetted Officer.
- Original Passport (Nationals of Nepal who do not have a passport, copy of Authenticated Citizenship Card has to be submitted) originals must be availed for verification.
- 5 Nos. coloured photo of good quality (passport size).
- Medical Report on JOSAA website.
- Character Certificate.
- Transfer Certificate.
- Migration Certificate.
- Fee Receipt
- **NECESSARILY bring two sets of self attested photocopy of above mentioned documents in the same order.**
- Anti-Ragging Affidavit by the student (submitted on a Non-Judicial stamp paper of Rs. 10/- duly authorized by the Oath Commissioner)
- Anti-Ragging Affidavit by the Parent/ Guardian (submitted on a Non-Judicial stamp paper of Rs. 10/- duly authorized by the Oath Commissioner)
- MCAIP Form for “Medical-cum-Accidental Insurance Benefit Scheme” has to be submitted in duplicate (will be provided at the time of admission).

## FEE STRUCTURE FOR B.TECH (IIIT-LUCKNOW)

<b>Details of fee structure for B.Tech. Programme (General and OBC Category)</b>			
<b>Sl. No.</b>	<b>Items</b>	<b>Periodicity</b>	<b>Amount(Rs.)</b>
1	Admission	One Time	150
2	Grade Card Fee	One Time	150
3	Provisional Certificate Fee	One Time	100
4	Medical Examination Fee	One Time	100
5	Student Welfare Fund	One Time	200
6	Identity Card Fee	One Time	50
7	Tuition Fee	Per Semester	45,000
8	Examination Fee	Per Semester	350
9	Registration/ Enrolment Fee	Per Semester	200
10	Gymkhana Fee	Per Semester	200
11	Medical Fee	Per Semester	100
12	Institute Caution Money	One Time (Refundable)	1,000
13	Library Caution Money	One Time (Refundable)	1,000
14	Hostel Admission Fee	One Time	400
15	Hostel Rent	Per Semester	1,000
16	Fan, Electricity and water charges	Per Semester	2,000
17	Hall Caution Money	One Time (Refundable)	1,000
<b>Total without mess related fee/ deposit</b>			<b>53,000</b>

Mess related collection for all hosteller students

18	Mess Deposit	One Time (Refundable)	2,600
19	Hall Mess Establishment Charges	One Time	1,000
20	Hostel Fund	Per Semester	400
21	Mess Advance	First Month	2,600
<b>Total of Mess related fee/ deposit</b>			<b>6,600</b>

(Note: Mess related fee may change time to time depending on cost of food)

- |  |                    |
|--|--------------------|
| 1. Fee for 1 <sup>st</sup> semester                    | Rs. 53,000         |
| 2. Fee for remaining 7 semester (48850X7)              | Rs. 341,950        |
| 3. Mess related fee for 8 semester (3200X48)           | Rs. 153,600        |
| <b>Total fee for 4 years B.Tech Programme (Approx)</b> | <b>Rs. 548,550</b> |

<b>Details of fee structure for B.Tech. Programme (SC, ST &amp; PWD Category)</b>			
<b>Sl. No.</b>	<b>Items</b>	<b>Periodicity</b>	<b>Amount(Rs.)</b>
1	Admission	One Time	150
2	Grade Card Fee	One Time	150
3	Provisional Certificate Fee	One Time	100
4	Medical Examination Fee	One Time	100
5	Student Welfare Fund	One Time	200
6	Identity Card Fee	One Time	50
7	Tuition Fee	Per Semester	36,000
8	Examination Fee	Per Semester	350
9	Registration/ Enrolment Fee	Per Semester	200
10	Gymkhana Fee	Per Semester	200
11	Medical Fee	Per Semester	100
12	Institute Caution Money	One Time (Refundable)	1,000
13	Library Caution Money	One Time (Refundable)	1,000
14	Hostel Admission Fee	One Time	400
15	Hostel Rent	Per Semester	1,000
16	Fan, Electricity and water charges	Per Semester	2,000
17	Hall Caution Money	One Time (Refundable)	1,000
<b>Total without mess related fee/ deposit</b>			<b>44,000</b>

Mess related collection for all hosteller students

18	Mess Deposit	One Time (Refundable)	2,600
19	Hall Mess Establishment Charges	One Time	1,000
20	Hostel Fund	Per Semester	400
21	Mess Advance	First Month	2,600
Total of Mess related fee/ deposit			6,600

(Note: Mess related fee may change time to time depending on cost of food)

- |   |             |
|---|-------------|
| 1. Fee for 1 <sup>st</sup> semester             | Rs. 44,000  |
| 2. Fee for remaining 7 semester (39850X7)       | Rs. 278,950 |
| 3. Mess related fee for 8 semester (3200X48)    | Rs. 153,600 |
| Total fee for 4 years B.Tech Programme (Approx) | Rs. 476,550 |

**Mode of Fee Payment:**

**For IIT-Allahabad Main Campus**

- All fees & dues can be paid through MICR type Demand Draft drawn in favour of “IIT Allahabad” from any nationalized bank and made payable at “Allahabad”
- For Mess Fee - Separate DD of Rs.12,860/- to be made in favour of “Council of Wardens IIT-Allahabad” payable at Allahabad.
- Name, Enrollment Number and Mobile Number should be clearly written on the backside of the draft.

**For RGIIT, Amethi Campus**

- DD for Fee in favour of “RGIIT Amethi Fee A/c” payable at Amethi
- DD of Rs. 12,586/- for Mess Charges in favour of “Council of Wardens IIT-Allahabad” payable at Amethi.
- Name, Enrollment Number and Mobile Number should be clearly written on the backside of the draft.

**For IIT-Lucknow**

- DD in favour of “**IITS Lucknow**” payable at **Allahabad**.

**For General & OBC :**

Ist Sem. Fee -	53,000=00
Mess Related Fee -	6,600=00
Mess Fee -	19,200=00
Total (in Rs.)-	78,800=00

**For SC, ST & PD:**

Ist Sem. Fee -	44,000=00
Mess Related Fee -	6,600=00
Mess Fee -	19,200=00
Total (in Rs.)-	69,800=00

- Name, Enrollment Number and Mobile Number should be clearly written on the backside of the draft.

**Banking Facility:**

- Extension counters of Canara Bank & Indian Overseas Bank exist at the Institute where students can open their personal accounts. ATM service is provided by HDFC bank and is available at Gate No. 1 of Institute.

### **Hostel Facility:**

The Institute is fully residential. All the Hostels (includes four boys hostel & three girls hostel) provided with modern boarding and lodging facilities. Hostels have adequate recreational facilities including sports. Each student is provided with a Cot, Table, Chair and an Almirah space, the suggested list of items that may be required by a Hosteler during the course of his/ her stay on campus is likely to include the following:

- One bucket with mug + soap with soap case + Door Lock
- Bedding with warm clothing, Blanket/ Quilt & Mosquito Net.
- Temperature at Allahabad & Amethi ranges between 7-10 in winters (December - January) and 40 – 49 in summers (April – June).
- Table Lamp – In case you are habitual otherwise Tube lights are provided in all rooms.
- Appropriate Clothing & Shoes.

### **Medical Facility:**

Round the clock medical facility is available at the Institute campus. MEDICLAIM cum Accidental Insurance Policy (MCAIP) is also available at the Institute.



# MEDICAL EXAMINATION REPORT

(Please attach photocopy of Medical Report (Annexure-8) available on JOSAA website)

## **MEDICAL CERTIFICATE**

(To be issued by IIIT-A health Centre in Allahabad)

**Certified** that..... Son/daughter of .....

- a) Fulfills the prescribed standard of physical fitness and is FIT for admission to B.Tech. Program offered by IIIT-A.
- b) Does not fulfill the prescribed standard of physical fitness and is unfit / temporarily unfit to admission due to following defects:

.....

\_\_\_\_\_  
**Signature of the medical Officer at IIIT-A**

### **Declaration**

I hereby declare that I am not suffering from any disease other than mentioned in the medical report.

In case if any other disease is found for which I am taking treatment for long time and that is not reported to the Institute at the time of admission then the Institute will not be bear the cost of treatment.

\_\_\_\_\_  
**Signature of Candidate**

**Note:** Institute is not liable for the chronic disease treatment which required the prolonged/ lifelong treatment.

**Note: Please attach photocopy of Medical Report (Annexure - 8) available on JOSAA website.**

**FORM OF MEDICAL CERTIFICATE FOR PERSONS WITH DISABILITIES (PwD)  
NAME AND ADDRESS OF THE INSTITUTE/HOSPITAL**

Certificate No. \_\_\_\_\_ Date: \_\_\_\_\_

**DISABILITY CERTIFICATE**

1. This is to certify that Smt/Shri/Kum \_\_\_\_\_ --son/daughter of Shri \_\_\_\_\_  
age \_\_\_\_\_ Male/Female having identification marks as below:  
\_\_\_\_\_ is suffering from permanent disability of following category:

- A. Locomotor or cerebral palsy:
- (i) BL – Both legs affected but not arms.
  - (ii) BA - Both arms affected: a) Impaired reach b) Weakness of grip
  - (iii) OL - One leg affected (right or left): a) Impaired reach b) Weakness of grip c) Ataxic
  - (iv) OA - One arm affected (right or left): a) Impaired reach b) Weakness of grip c) Ataxic
  - (v) BH - Stiff Back and hips (cannot sit or stoop)
  - (vi) MW - Muscular Weakness and limited physical endurance.

B. Blindness or Low Vision: (i) B - Blind (ii) PB - Partially Blind

C. Hearing Impairment: (i) D - Deaf (ii) PD - Partially Deaf.

(Delete the category whichever is not applicable)

Paste here your recent  
colour photograph  
showing the disability  
(The Photograph should  
be attested by the  
Chairperson of the  
Medical Board)

Signature of the candidate

2. This condition is progressive/non-progressive/likely to improve/ not likely to improve. Re-assessment of this case is not recommended/ recommended after a period \_\_\_\_\_ years \_\_\_\_\_ months.

3. Percentage of disability in his/ her case is \_\_\_\_\_ Percent.

4. Smt./Shri/Kum \_\_\_\_\_ meets the following physical requirement for discharge of his/her duties.

- |   |     |                          |    |                          |
|---|-----|--------------------------|----|--------------------------|
| (i) F-can perform work by manipulating with fingers | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (ii) PP-can perform work by pulling and pushing     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (iii) L--can perform work by lifting                | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (iv) KC-can perform work by kneeling and crouching  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (v) B-can perform work by bending                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (vi) S-can perform work by sitting                  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (vii) ST-can perform work by standing               | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (viii) W-can perform work by walking                | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (ix) SE-can perform work by seeing                  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (x) H-can perform work by hearing/speaking          | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| (xi) RW-can perform work by reading and writing     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

(Signature of Doctor)  
Name:  
Registration No.:  
Member Medical Board

(Signature of Doctor)  
Name:  
Registration No.:  
Member Medical Board

(Signature of Doctor)  
Name:  
Registration No.:  
Member Chairperson,  
Medical Board

\*Please delete the words which are not applicable  
Place: \_\_\_\_\_ Date: \_\_\_\_\_

**Counter Signature of the Medical Superintendent/CMO/Head of Hospital (with seal)**

Note : (i) According to the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full participation) Rules, 1996 notified on 31.12.1996 by the Central Government in exercise of the powers conferred by sub-section(1) and (2) of Section 73 of the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (1 of 1996), authorities to give disability Certificate will be a Medical Board duly constituted by the Central or the State Government. The State Government may constitute a Medical Board consisting of at least three members out of whom at least one shall be a specialist in the particular field for assessing locomotor/ hearing & speech disability, mental retardation and leprosy cured, as the case may be. (ii) The certificate would be valid for a period of 5 years for those whose disability is temporary. For those who acquired permanent disability, the validity can be shown as permanent.

SC/ST Certificate Format  
**FORM OF CERTIFICATE TO BE PRODUCED BY SCHEDULED CASTES AND  
 SCHEDULED TRIBES CANDIDATES**

1. This is to certify that Shri/ Shrimati/ Kumari\* \_\_\_\_\_  
 son/daughter\* of \_\_\_\_\_ of Village/Town\* \_\_\_\_\_  
 District/Division\* \_\_\_\_\_ of State/Union Territory\* \_\_\_\_\_  
 belongs to the \_\_\_\_\_ Scheduled Caste / Scheduled Tribe\* under :-

\* The Constitution (Scheduled Castes) Order, 1950

\* The Constitution (Scheduled Tribes) Order, 1950

\* The Constitution (Scheduled Castes) (Union Territories) Order, 1951

\* The Constitution (Scheduled Tribes) (Union Territories) Order, 1951

[As amended by the Scheduled Castes and Scheduled Tribes Lists (Modification Order) 1956, the Bombay Reorganisation Act, 1960, the Punjab Reorganisation Act, 1966, the State of Himachal Pradesh Act, 1970, the North Eastern Areas (Reorganisation) Act, 1971, the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 1976 and the Scheduled Castes and Scheduled Tribes Orders (Amendment) Act, 2002]

\* The Constitution (Jammu and Kashmir) Scheduled Castes Order, 1956;

\* The Constitution (Andaman and Nicobar Islands) Scheduled Tribes Order, 1959, as amended by the Scheduled Castes and Scheduled Tribes Order (Amendment) Act, 1976;

\* The Constitution (Dadara and Nagar Haveli) Scheduled Castes Order, 1962;

\* The Constitution (Dadara and Nagar Haveli) Scheduled Tribes Order, 1962;

\* The Constitution (Pondicherry) Scheduled Castes Order, 1964;

\* The Constitution (Uttar Pradesh) Scheduled Tribes Order, 1967;

\* The Constitution (Goa, Daman and Diu) Scheduled Castes Order, 1968;

\* The Constitution (Goa, Daman and Diu) Scheduled Tribes Order, 1968;

\* The Constitution (Nagaland) Scheduled Tribes Order, 1970;

\* The Constitution (Sikkim) Scheduled Castes Order, 1978;

\* The Constitution (Sikkim) Scheduled Tribes Order, 1978;

\* The Constitution (Jammu and Kashmir) Scheduled Tribes Order, 1989;

\* The Constitution (Scheduled Castes) Order (Amendment) Act, 1990;

\* The Constitution (Scheduled Tribes) Order (Amendment) Act, 1991;

\* The Constitution (Scheduled Tribes) Order (Second Amendment) Act, 1991;

2. # This certificate is issued on the basis of the Scheduled Castes / Scheduled Tribes\* Certificate issued to Shri /Shrimati\* \_\_\_\_\_ father/mother\* of Shri /Shrimati /Kumari\* \_\_\_\_\_ of Village/Town\* \_\_\_\_\_ in District/Division\* \_\_\_\_\_ of the State State/Union Territory\* \_\_\_\_\_ who belong to the Caste / Tribe\* which is recognised as a Scheduled Caste / Scheduled Tribe\* in the State / Union Territory\* \_\_\_\_\_ issued by the \_\_\_\_\_ dated \_\_\_\_\_.

3. Shri/ Shrimati/ Kumari \* \_\_\_\_\_ and / or\* his / her\* family ordinarily reside(s)\*\* in Village/Town\* \_\_\_\_\_ of \_\_\_\_\_ District/Division\* of the State Union Territory\* of \_\_\_\_\_.

Signature: \_\_\_\_\_

Designation \_\_\_\_\_

(with seal of the Office)

Place: \_\_\_\_\_ State/Union Territory\* \_\_\_\_\_

Date: \_\_\_\_\_

\* Please delete the word(s) which are not applicable.

# Applicable in the case of SC/ST Persons who have migrated from another State/UT.

**IMPORTANT NOTES**

The term "ordinarily reside(s)\*\*" used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.

Officers competent to issue Caste/Tribe certificates:

1. District Magistrate / Additional District Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / City Magistrate / Sub-Divisional Magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner.

2. Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.

3. Revenue Officers not below the rank of Tehsildar.

4. Sub-divisional Officer of the area where the candidate and/ or his family normally reside(s).

5. Administrator / Secretary to Administrator / Development Officer (Lakshdweep Island).

6. Certificate issued by any other authority will be rejected

## OBC-NCL Certificate Format

FORM OF CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES (NCL)  
APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs),  
UNDER THE GOVERNMENT OF INDIA

This is to certify that Shri/Smt./ Kum\* \_\_\_\_\_  
Son/Daughter\* of Shri/Smt.\* \_\_\_\_\_ of Village/Town\* \_\_\_\_\_  
\_\_\_\_\_ District/Division\* \_\_\_\_\_  
in the State/Union Territory \_\_\_\_\_ belongs to the  
\_\_\_\_\_ community which is recognized as a  
backward class under Government of India\*\*, Ministry of Social Justice and Empowerment's  
Resolution No. \_\_\_\_\_ dtd. \_\_\_\_\_ \*\*\*.  
Shri/Smt./Kum. \_\_\_\_\_ and/or  
his/her family ordinarily reside(s) in the \_\_\_\_\_ District/Division of the  
\_\_\_\_\_ State/ Union Territory. This is also to certify that he/she  
does NOT belong to the persons/sections (Creamy Layer)[based on the parental income in the  
financial year 2013-14 viz. 1<sup>st</sup> April 2013 to 31<sup>st</sup> March 2014] mentioned in Column 3 of the  
Schedule to the Government of India, Department of Personnel & Training O.M. No.  
36012/22/93-Estt.(SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt.(Res.)  
dated 09/03/2004, further modified vide OM No. 36033/3/2004-Estt. (Res.) dated 14/10/2008,  
again further modified vide OM No.36036/2/2013-Estt (Res) dtd. 30/05/2014.

District Magistrate /  
Deputy Commissioner /  
Competent Authority

Dated:

Seal

**\* Please delete the work(s) which are not applicable.**

**\*\*As listed in Annexure –A\*\*\* The authority issuing the certificate needs to mention the details of Resolution of Government of India, in which the caste of the candidate is mentioned as OBC.**

**NOTE:**

- (a) The term 'Ordinarily resides' used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificates are indicated below:
  - (i) District Magistrate / Additional Magistrate / Collector / Deputy Commissioner / Additional Deputy Commissioner / Deputy Collector / Ist Class Stipendiary Magistrate / Sub-Divisional magistrate / Taluka Magistrate / Executive Magistrate / Extra Assistant Commissioner (not below the rank of Ist Class Stipendiary Magistrate).
  - (ii) Chief Presidency Magistrate / Additional Chief Presidency Magistrate / Presidency Magistrate.
  - (iii) Revenue Officer not below the rank of Tehsildar' and
  - (iv) Sub-Divisional Officer of the area where the candidate and/or his family resides.

**( To be submitted on a Non-Judicial Stamp Paper of Rs. 10/- duly notarised by the Oath Commissioner)**  
**AFFIDAVIT BY THE STUDENT**

1) I,..... (full name of student with admission/registration/enrolment number) s/o d/o Mr./Mrs./Ms. ...., having been admitted to (name of the institution) , have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the “Regulations”) carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) I will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.

6) I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled. Declared this \_\_\_day of \_\_\_\_\_ month of \_\_\_\_\_year.

\_\_\_\_\_  
**Signature of deponent**

**Name:**

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_(place) on this \_\_\_day of \_\_\_Month of the \_\_\_\_\_ Year.

**Signature of deponent**

Solemnly affirmed and signed in my presence on this the \_\_\_\_ (day) of \_\_\_\_\_ (month), \_\_\_\_ (year ) after reading the contents of this affidavit.

**OATH COMMISSIONER**

**( To be submitted on a Non-Judicial Stamp Paper of Rs. 10/- duly notarised by the Oath Commissioner)**

**AFFIDAVIT BY PARENT/GUARDIAN**

1) I, Mr./Mrs./Ms. \_\_\_\_\_ (full name of parent/guardian) father/mother/guardian of \_\_\_\_\_, (full name of student with admission/registration/enrolment number) \_\_\_\_\_, having been admitted to \_\_\_\_\_(name of the institution) \_\_\_\_\_, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the “Regulations”), carefully read and fully understood the provisions contained in the said Regulations.

2) I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.

3) I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.

4) I hereby solemnly aver and undertake that

a) My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.

b) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.

5) I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.

6) I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.

Declared this \_\_\_day of \_\_\_\_\_ month of \_\_\_\_\_year.

\_\_\_\_\_  
**Signature of deponent**

**Name:**

**Address:**

**Telephone/Mobile No.:**

**VERIFICATION**

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at \_\_\_\_\_(place) on this \_\_\_day of \_\_\_\_\_Month of the \_\_\_\_\_ Year.

\_\_\_\_\_  
**Signature of deponent**

Solemnly affirmed and signed in my presence on this the \_\_\_\_\_(day) of \_\_\_\_\_(month), \_\_\_\_\_(year ) after reading the contents of this affidavit.

**OATH COMMISSIONER**

**Mediclaime – cum – Accidental Insurance Benefits Scheme (MCAIP) *Ann. 2***

**Offered by**

**National Insurance Company Limited**


**EXCLUSIVELY for IIIT – A and RGIIT – Amethi Students**

**Broad Features of the Scheme\***

- MEDICLAIM Hospitalisation Cover – Upto Rs. 60,000/- per annum.
- Accidental Death OR Permanent Disablement of Insured Student – Upto Rs. 5 Lakhs.
- Carriage of Dead Body of the Insured, upon Accidental Death to place of Normal Residence – Rs. 5,000/-
  - Upon Accidental Death of Fee Paying Parent / Guardian – Rs. 3 Lakhs.
- Education Expenses to Dependent Children of Married Insured Students – Upto Rs. 25,000/- per child.
  - Mediclaim coverage extends throughout India on 24x7 basis.
- Territorial limits for Accidental Death / Permanent Disablement Insurance extend throughout the world.
  - Treatments under Allopathic System of Medicine are only covered.
  - Dental treatments and Physiotherapy are not covered for claims/ reimbursements.
- CASHLESS ACCESS SERVICES, at designated Hospitals, subject to Pre – Authorisation.
- Spouse of married Students AND also their dependent Children CAN be covered, for extension benefits, upon payment of additional premiums. NOT COVERED by default in this cover.

(\*Conditions Apply)

**Information REQUIRED from each IIIT-A / RGIIT Amethi Student to enable him/her avail the benefit under the Scheme**

Sl. No.	Item	Information	Remark
1	Name of the Student to be Insured	Mr./ Ms./ Dr..... s/o OR d/o ..... Address:..... Enrollment No:..... Degree Program of Enrollment at IIIT-A / RGIITA :..... Nationality :.....	 A Colored Photograph of the Student being Insured, duly Self Attested  Date of Birth:.....\.....\..... Sex: Male \ Female Blood Group :.....
2	Complete Address of NORMAL RESIDENCE of the Enrolled Student	Phone Number:..... Email:..... PIN Code:..... Police Station:.....	
3	Details of the FEE PAYING Parent / Guardian of the Enrolled Student	Name:..... Relationship with the Student:..... Address:..... Phone Number:..... PIN Code:..... Email:.....	In the event of the fee paying Parent / Guardian not remaining alive (owing to accidental death, during the Policy Period), during the course of the continuation of the enrolled Degree Program of the student, the student shall be eligible for a payment of Rs. 3.00 Lakh, to assist with the continuation of the studies of the student.
	(a) Marital Status of the Enrolled Student	Married / Un Married	In case of accidental death of the enrolled student, during the

4	(b) In Case " <b>Married</b> ", then PI. provide the following:	(a) Name of Spouse:..... ..... (b) Age:.....Yrs..... (c) Address:..... ..... Phone Number:..... PIN Code:..... Email:.....	policy period, who is survived by a Spouse, Spouse shall be the NOMINEE for receiving the Insurance benefits, unless otherwise specified. In respect of Unmarried students, the Normal Fee Paying Parent / Guardian shall be the beneficiary.
4 Contd.	(c) Do you have dependent Children	Yes / No	In case of accidental death of the Insured Student, during the policy period, survived by his dependent children, upto TWO dependent children are eligible for receiving a sum of upto Rs. 25,000/- each, as a onetime assistance by the Insurance company.
(d) In case " <b>Yes</b> " to (c) above, PI. provide the details:	<b><u>In respect of First Child (Elder One):</u></b> (a) Name of Child:..... ..... (b) Age:.....Yrs. Sex: M / F (c) Address:..... ..... Phone Number:..... PIN Code:..... Email:..... <b><u>In respect of Second Child (Younger One):</u></b> (a) Name of Child:..... ..... (b) Age:.....Yrs. Sex: M / F (c) Address:..... ..... Phone Number:..... PIN Code:..... Email:.....		
5	<b>Pre Existing Diseases*, at the time of admission into the Institute.</b> (* The ones that exist at the time of enrolling at the Institute PLUS the ones those arise within 30 days of the inception of the Insurance Policy. Also include diseases attributable to Pre-existing diseases.)	(a)..... (b)..... (c)..... (d)..... (e)..... (Pi. add if more)	<b>PRE EXISTING Diseases</b> qualify for claim only after four continuous claim free years, in respect of those diseases. Few diseases, that arise after the inception of the coverage, are however included in the list of diseases that are not payable only during the <b>FIRST</b> year of operation of Policy. (Refer Policy document for details)

**(Note: The above is a brief description of the salient features of the intended Insurance Policy and is not a replica of the full Policy document. For details, reference to the Policy document should be made.)**

**UNDERTAKING :**

- I willingly AGREE to abide by the Terms and Conditions of the MEDICLAIM – cum – Accidental Insurance Policy as briefed herein above.
- I shall personally be responsible for the correctness and completeness of the information provided above and to the satisfaction of the Insurance Company. Also in case of change in my Marital Status, for being eligible for the accrued benefits by the Insurance Company in the same respect, I shall keep the Institute duly apprised.
- Also, I understand that all claims pertaining to Mediclaim-cum-Accidental Insurance Scheme shall be settled by Insurance Company only and Institute's liability in this respect shall be restricted to being assistive only.

Signature of the Enrolled Student:.....

Name of the Enrolled Student:.....

Enrollment Number of the Student :.....

Signature of Father / Mother / Guardian of the Enrolled Student:.....