



# दीन दयाल उपाध्याय कॉलेज DEEN DAYAL UPADHYAYA COLLEGE

(दिल्ली विश्वविद्यालय) (UNIVERSITY OF DELHI)

दिल्ली रा. रा. क्षेत्र सरकार द्वारा 100% वित्त पोषित, 100% funded by Govt. of NCT of Delhi

सेक्टर -3, द्वारका, नई दिल्ली Sector-3, Dwarka, New Delhi – 110078

दूरभाष/Tel. 011- 41805580, 45051037, Website: <https://ddu.collegedu.ac.in>

For Office Use

Date \_\_\_\_\_

Diary No. \_\_\_\_\_

## No Objection Certificate for Participation in Extra-Curricular Activities

I \_\_\_\_\_ (Name) Student of \_\_\_\_\_ (name of the course), Semester \_\_\_\_\_ with College Roll No. \_\_\_\_\_ would like to participate in the activity \_\_\_\_\_ (Name of the Activity and mention whether it is a Team or Solo performance) which is part of the Event \_\_\_\_\_ to be held at \_\_\_\_\_ (Name of the Institution and State). The Event is of \_\_\_\_\_ level (Intercollege/University/National/International) Kindly grant me permission to attend the same from \_\_\_\_\_ to \_\_\_\_\_ (.....No. of Days).

Kindly consider it for attendance benefit.

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

Signature of the Student : \_\_\_\_\_

Name of the Student : \_\_\_\_\_

Roll No. of the Student : \_\_\_\_\_

Name of the SAB Society : \_\_\_\_\_

## Recommended By:

Name and Signature of the Convener of the SAB Society

Name and Signature of SAB Coordinator

## Approved/Not Approved

*(If the Application is approved then photocopy of the approval be provided to the Student and Original Application be kept in the Admin Office with concerned DA)*

Principal





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## Application for Concession in Attendance on account of Participation in Extra-Curricular Activities

I \_\_\_\_\_ (Name) Student of \_\_\_\_\_ (name of the course), Semester \_\_\_\_\_ with College Roll No. \_\_\_\_\_ has participated and/or Won \_\_\_\_\_ (I/ II/ III prize) in \_\_\_\_\_ (Name of the Activity and mention whether it is a Team or Solo performance) which is part of the Event \_\_\_\_\_ to be held at \_\_\_\_\_ (Name of the Institution and State). The Event is of \_\_\_\_\_ level (Intercollege/University/National/International) held from \_\_\_\_\_ to \_\_\_\_\_ (.....No. of Days) for which I have taken prior permission from the college (Photocopy of the approval is attached)

**\*N.B. If participated/won in more than one activity fill Annexure-1**

I am attaching the following documents in support for the above:

1. Self-Attested Copy Certificate of Participation/Winning

(Please v)

☐

2. Application for seeking permission to participate

☐

Signature of the Student : \_\_\_\_\_

Name of the Student : \_\_\_\_\_

Roll No. of the Student : \_\_\_\_\_

Name of the SAB Society : \_\_\_\_\_

## Recommended By:

Name and Signature of the Convener of the SAB Society

Name and Signature of SAB Coordinator

## For Office Use Only

Checked and verified the documents attached by the student and calculation of benefit based on the same is given below:

Actual Attendance	
Period of Absence	
Actual Days minus Closed Days	

The Above-mentioned information has been compiled in an EXCEL Sheet for the \_\_\_\_\_ (Month/YYYY) which shall be shared with the attendance committee in second week of every month.

Dealing Assistant

SO. (Admin)

Admin. Officer

Convenor Attendance Committee

Principal

**Proforma for Availing Concession in Attendance on account of Participation in Extra-Curricular Activities**

<b>S.No.</b>	<b>Name of the Event/organized by/at which place</b>	<b>Name of the SAB Society represented</b>	<b>Level (intercollege, university, national, international)</b>	<b>Participation/ prize (mention I, II, III)</b>	<b>Dates ( ...to.....)</b>

**All Documents attached are verified and recommended By:**

Name and Signature of the Convener of the SAB Society

Name and Signature of SAB Coordinator