

**INDIRA GANDHI INSTITUTE OF PHYSICAL EDUCATION & SPORTS SCIENCES**

(University of Delhi)

B-BLOCK, VIKASPURI, NEW DELHI-110018

Dated: 17.01.2023

Ref/IPE/2023/19/1303

**STUDENT – NOTICE**  
**FREE-SHIP / FEE-CONCESSION**

It is to inform to all the students of B.Sc. (PEHE & S) Semester-I, B.P.Ed. Semester-I and M.P.Ed. Semester-I who are under BPL Category or EWS categories etc. and want to avail the Free-ship / Fee Concession are required to fill & submit the Application Form along with required documents to Mr. Ankur Gola / Mr. Rishi Pal, Students' Dealing Section latest by 25.01.2023. The Application Form will be available in Students' Dealing Section as well as on the website on the Institute. No application will be entertained beyond the last date.

Those students who have already applied, need not to apply again.

All concerned may please note the same.

Sd/-

(PROF. PARDEEP KUMAR)

Convener

Fee and Scholarship Committee

Copy to:

1. Circulation among Committee Members:-
  1. Prof. Pardeep Kumar - Convener
  2. Prof. Rita Jain - Member
  3. Prof. Aruna Gulati - Member
  4. Dr. Ekta Bhushan Satsangi - Member
  5. Dr. Dharmender Kumar - Member
2. Student Notice Board
3. S.O. (Admn.)
4. P.A. to Principal (Offg.)
5. Student dealing Section
6. Computer Section for uploading in Institute's website.
7. Office file

(PROF. PARDEEP KUMAR)

Convener

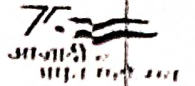
Fee and Scholarship Committee



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B-Block, Vikaspuri, New Delhi-110 018.



**Application Form for Fee Concession / Fee-ship**

1. Name of the Student : \_\_\_\_\_
2. Class in which studying : \_\_\_\_\_
3. Father's Name : \_\_\_\_\_
4. Mother's Name : \_\_\_\_\_
5. Date of Birth (Attach Proof) : \_\_\_\_\_
6. Residential Address : \_\_\_\_\_  
\_\_\_\_\_
7. Mobile No. : \_\_\_\_\_
8. Aadhar No. : \_\_\_\_\_
9. Details of Proof of Family Income : \_\_\_\_\_  
Certificate / Affidavit (Attach Proof)
10. Details of previous Semester : \_\_\_\_\_  
Academic Marksheet (Attach Proof)

**Undetaking**

I hereby undertake that I have not availed the Free-ship from any other source/agency.

**(SIGNATURE OF THE CANDIDATE)**

Dated: \_\_\_\_\_

