

UNIVERSITY SCHOOL OF FIRE AND INDUSTRIAL SAFETY GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY

"A State University Established by the Govt. of NCT of Delhi" Sector-16C, Dwarka, New Delhi-110 078

Contact: +91-11-25302623

E-mail: deanusfis@ipu.ac.in, Website: www.ipu.ac.in



GGSIPU/USFIS/2025/

Date: 17th July 2025

NOTICE

Schedule for document submission (through electronic system) for MBA (Fire and Industrial Safety) (programme code 185) during Session 2025-26

Last Date to submit documents	Time	S. No. of Candidates
21st July 2025	5:00 PM	All Candidates as per the <i>list</i> attached

The candidates need to upload the below-mentioned documents to the Google form link https://forms.gle/LxHGbxDVejHNVRPx6 by 5 PM on 21st July 2025.

- 1. Admission Verification Form (Format attached)
- 2. Provisional Certificate/ Degree/ Marksheet
- 3. NoC from present employer and Professional Experience Certificate, if applicable
- 4. Character Certificate
- 5. Reservation Certificate: Candidates wish to claim seat in Reserve Category may please refer in the Chapter 6: Reservation Policy of the Admission Brochure 2025-26.
- 6. Medical Certificate: Certificate of medical fitness, signed by a Registered Medical Practitioner holding a medical degree (*Format attached*).

Note: 1. Allotment of seats will be done in order of merit/ rank as per seat intake of MBA Fire and Industrial Safety (programme code 185). Counselling/ admission for the seats shall be stopped as and when seats are filled up.

2. For seeking admission in MBA Fire and Industrial Safety Programme, eligibility criteria mentioned in Admission Brochure 2025-26 may be referred, available at www.ipu.ac.in. For any query, please contact the undersigned.

Prof. Cagan Deep Sharma)
Project Incharge, USFIS

Copy for information and necessary arrangement to

- 1. Controller of Finance, GGSIP University
- 2. Incharge (Admission), GGSIP University

List of candidates

MBA (FIS) 2025-27			
S.no	Name	Application no	
1	Vidit Maheshwari	185251000062	
2	Harsh Singh	185251000003	
3	Satbir Singh Dahiya	185251000006	
4	Harshprye Kumar	185251000082	
5	Satbir Singh Dahiya	185251000046	
6	Mahesh Dadaji Warbhe	185251000016	
7	Sumit Kumar	185251000126	
8	Amit Katara	185251000065	
9	Manish Sagar	185251000077	
10	Md Aman	185251000011	
11	Vivek Saini	185251000005	
12	Vedanshi Choudhary	185251000121	
13	Gursant Singh Bakshi	185251000086	
14	Parth Rajput	185251000074	
15	Surender Dagar	185251000066	
16	Riya Makkar	185251000032	
17	Neha Kumari	185251000119	
18	Abhinivesh Singh	185251000014	
19	Mohd Amaan Alam	185251000015	
20	Divyam Gupta	185251000017	
21	Nitish Bhardwaj	185251000024	
22	Dheeraj Thakre	185251000101	
23	Ayush Shukla	185251000090	





GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY (A State University established by the Govt. of NCT of Delhi)



ADMISSION VERIFICATION FORM FOR THE ACADEMIC SESSION 2024-25

Name of Candidate: (Mr./Miss/Mrs.)	
Father's/ Guardian's Name: (Mr./ Shri)	
Address: PIN CodeTele. No. (with STD code)Mobil Email:	The state of the s
PIN CodeTele. No. (with STD code)Mobil	le No
Minority Community (If applicable) (Sikh / Muslim / Jain / Ch	ristian)
NLT/CET/CUET Application No Category (SC/ST/OBC/Dec.)	efence/PWD/Kashmiri Migrant/Army)
NLT /CET /CUET Rank Programme	commence and the second second
School / College location of qualifying examination Date of Birth Age as on 1-8-2024: years months	(Delhi / Outside Delhi)
2. Date of Birth Age as on 1-8-2024: years months	days
(As per Secondary School Certificate)	
3. Passed Senior Secondary Examination / Three year Diploma in Engg/B Sc Grad	duation (3 yrs)
4. Aggregate percentage of all subjects in Sr. Secondary Examination/Dip. in Engage	g/B Sc Graduation (3 yrs)
5. Passed in English in 12th Class (Yes/No)	
 6. PCM/PCBM Percentage in 12th Class	TA CALALI D. L.
7. Percentage in qualifying degree as per the eligibility condition specified in PAR	11 A of the Admission Brochure:
8 Passed in Maths / Computer Science / Computer Applications in 12th Class	
8. Passed in Maths / Computer Science / Computer Applications in 12th Class9. Category Certificate SC/ST/OBC/PWD/Defence/Kashmiri Migrants/Minority Computer Applications in 12th Class9.	ommunity (Attach photocopy):
10. Character Certificate (Attach photocopy) (Yes/No)	dimining (crimer process)
11 Medical Certificate (Attach Original) (Yes/No)	
12. Passed Graduation in the year Percentage of marks in grad 13. Passed Post-Graduation in the year Percentage of marks in post	duation
13. Passed Post-Graduation in the year Percentage of marks in pos	t-graduation
14. (a) CAT/CMAT/CET Score/Rank	
(b) Year of Passing	
(b) Year of Passing	
Amt: DD No. Bank/Branch	
Amt: DD No. Bank/Branch	
Amt: DD No. Bank/Branch_	
I solemnly affirm that the information furnished above is true and correct in all resp	pects. I have not concealed any information.
I realize that if any information furnished herein is found to be incorrect or untra	
and also forgo my claim to the scat in the college. Further, that my candidature	for examination/selection and admission to
the course is liable to be cancelled. I agree to abide by the rules & regulations of t	the University.
CI D IO C	S'
Signature of the Parent/Guardian & Date	Signature of Candidate & Date
FOR OFFICE USE ONLY	
Certificates Checked and Verified by University official/Officer during counselling	ng:
Signature of the Deputed Officers/Officials	
Name of the Officer/Officials	

Appendix 5



GURU GOBIND SINGH INDRAPRASTHA UNIVERSITY (A State University established by the Govt. of NCT of Delhi) Accredited as NAAC A++ Grade



MEDICAL CERTIFICATE** (FOR THE ACADEMIC SESSION 2024-25) (TO BE SUBMITTED AT THE TIME OF COUNSELLING/ADMISSION)

Photograph duly attested by the officer who has certified this certificate

I certify that I have carefully examined Shri/Km/Smt.*	
son/ daughter/wife of Shri/Smt.*	whose
signature is given below. Based on the examination, I certify that he/sh	ne is in good mental and physical
health and is free from any physical defects which may interfere with his outdoor duties required of a professional. Visible Mark of Identification	
Signature of the Candidate	
Place :	
Date :	
	Name & Signature of the
	Medical Officer with Seal and Registration Number
* Strike whichever is not applicable.	
** To be signed by a Registered Medical Practitioner holding a medical of	degree.