NOTICE

Applications are invited from whole-time regular Non-Teaching employees of the University, who are desirous for pursuing further studies, for seeking departmental permission to appear in an examination of this University as a regular candidate by attending classes in evening shift OR through correspondence Courses in various examinations for the session 2020-2021 OR of any other Universities/Boards etc., as a private candidate, if otherwise eligible. Such permission shall be allowed only if the Registrar is satisfied that it would not interfere with the efficient discharge of the duties of the person concerned.

Applications on prescribed Proforma (specimen overleaf) duly complete in all respects, should reach the Estt. Branch (N.T.) through their respective Head of Deptt./Branch Officer with their specific recommendations latest by 19th June, 2020. The permission will be granted for the whole Course as per existing provision of the rules.

If the permission has already been granted to the employee(s) for any integrated Course, they are not required to apply again.

Applications received after the last date shall not be entertained at all.

REGISTRAR

Endst.No.EN-4/20/M-141(II)/3117 Dated 22-05-2020

Copy of the above is forwarded to the following with the request to arrange to get it noted from the non-teaching staff working under them:-

- 1. All HODs/Branch Officers, Maharshi Dayanand University, Rohtak
- Director, Centre for Professional & Allied Studies, Gurugram.
- Principal, University Campus School, Rohtak
- P.A./OSD to Vice-Chancellor./Registrar/Controller of Examinations(for kind information of Vice-Chancellor/ Registrar/COE), Maharshi Dayanand University, Rohtak
- 5. President, M.D.U. Teaching and Non-Teaching Employees Association, Rohtak
- All dealing Assistants (Estt. N.T.). Maharshi Dayanand University, Rohtak

Superintendent (Estt. N.T) for Registrar

APPLICATION FORM for departmental permission to appear in the University examinations as a private candidate/ to join evening classes/Directorate of Distance Education from this University or from any other University/Boards etc.

Sr.	Name			Designation	
No.	Traine.			Designation	
1.	Branch/Office/Deptt.				
2.	Nature of Appointment(Permanent/Temporary Adhoc) :				
3.	Date of Appointment			Date of Confirmation :	
4.	Total Service in this University:				555.00.00
5.	Qualification at the time of entry in the M. D. University service :				
6.	Exam. Passed while in the University service:				
	Name of the Exam. Year		Institution/Board /University		Whether departmental permission was granted earlier (say-yes OR no
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
7.	Last Exam. Passed/failed :		Year:		
8.	i) whether permission was granted last Year: ii) whether appeared in the said Exam: iii) whether permission was cancelled at a later stage (say Yes or No): If yes, mentioned name of the Examination: If yes, state reason:				
9.	Examination for which departmental permission is applied for :				
	Name of the Exam.	Private/Regula Correspondent	521V	itution/Board iversity	Session

I hereby declare that all entries in this Form are true to the best of my knowledge and belief. I understand that any material misrepresentation or omission made shall render me liable to disciplinary action.

Date:

(_____)

Signature

Recommendations of the Head of Deptt./Branch/Office