

# Guru Ghasidas Vishwavidyalaya, Bilaspur (CG)

(A Central University established by the Central Universities Act 2009)

## APPLICATION FOR AWARD OF CHANCELLOR GOLD MEDAL

Affix recent  
passport size  
photograph  
with self  
attestation

1. Notification No. : .....
2. Convocation for the year : .....
3. Name of Student (In Capital letter) : .....
- (In Hindi) : .....
4. Date of Birth (dd-mm-yyyy) : ...../...../.....
5. Father's Name : .....
6. Mother's Name : .....
7. Nationality : .....
8. Program Name : .....
9. Program Completed (year) : .....
10. Name of the Department : .....
11. Roll No. : .....
12. Enrolment No : .....
13. Mobile No. : .....
14. Email ID : .....
15. Aadhar No. / NAD ID (Digilocker) : .....

**Component 1 : Extra Curriculum Activities** (Organised at least at University level through open competition) (Max M.– 100)

S.No.	Name of the Activity	Year (Duration)	*Level	Position Secured	Marks claimed	Remarks
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			

\* **UL**- University Level, **IUL** – Inter University Level, **NL**- National Level, **INL** – International Level

**Component 2 : Sports and Games Achievements** (Organised at least at University level through open competition) (Max M.– 100)

S. No.	Name of the Activity	Year (Duration)	**Level	Position Secured	Marks claimed	Remarks
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			
			<input type="checkbox"/> UL <input type="checkbox"/> IUL <input type="checkbox"/> NL <input type="checkbox"/> INL			

\*\* **UL**- University Level, **IUL** – Inter University Level, **NL**- National Level, **INL** – International Level

**Component 3 : Social Services** (Organised at least at University level) (Max M.– 100)

S. No.	Name of the Activity	Year (Duration)	Certificate Level	Marks claimed	Remarks
1	NCC		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		
2	NSS		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		
3	Blood Donation		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C		
4	Student Leadership		<input type="checkbox"/> Office Bearer <input type="checkbox"/> Member		

**Component 4: Academic Performance** (Aggregate of All semester in Percentage) (Max M.– 100)

S. No.	Program name	Passing Year	Total Marks Obtained	Total Marks	Aggregate Percentage

**Component 5: Exemplary Contribution** (As per details available at Annexure-1) (Max.M-100)

S. No.	Name of Exemplary Contribution	Year	Level of Activity	Level Secured	Marks claimed
			At GGV/ District level & below At State Level At Ministry /Dept of Central Govt Level Certified at PMO / President Office level		
			At GGV/ District level & below At State Level At Ministry /Dept of Central Govt Level Certified at PMO / President Office level		
			At GGV/ District level & below At State Level At Ministry /Dept of Central Govt Level Certified at PMO / President Office level		

Note: If required a separate sheet may be attached for each component.

**16. Declaration to be signed by the student-**

I hereby declare that the information provided in this form are correct and true to the best of my knowledge and belief. If at any time, I am found to have concealed / suppressed information or given any false details, my award shall be liable to be withdrawn / cancelled without any notice or compensation.

**Signature of Student**

Name [ .....

Forwarded with the remarks that the application and enclosures submitted by the student has been checked and department has no objection to consider the application of the student for the award of Chancellor Gold Medal.

**Head of the Department**  
With seal and Signature

## Application for Award of Chancellor Gold Medal

- |   |                                    |
|---|------------------------------------|
| 1. Notification No. : .....                   | 2. Convocation for the year: ..... |
| 3. Name of Student (In Capital Letter): ..... | (In Hindi): .....                  |
| 4. Father's Name: .....                       | 5. Mother's Name: .....            |
| 6. Class/ Course: .....                       | 7. Course completed: .....         |
| 8. Roll. No: .....                            | 9. Enroll.No. ....                 |
| 10. Mobile No.....                            | 11. E-mail id: .....               |
| 12. Aadhar No./ NAD id : .....                |                                    |

### Calculation Table for Chancellor Gold Medal:-

To be filled by Student's					To be filled by HOD/Dean
S.No	Various Components	No. of Participation	Position Secured	Marks Claimed by Applicant's	Marks given by Verifier
01	<b><u>Extra-Curricular Activities</u></b>				
	University level				
	Inter University level				
	National level				
	International level				
02	<b><u>Sports and games Achievements</u></b> (Organized at least at University level through open competition)				
	University level				
	Inter University level				
	National level				
	International level				
03	<b><u>Social Services</u></b> (Organized at least at University level)				
	NCC				
	NSS				
	Blood Donation				
	Student Leadership				
04	<b><u>Academic Performance</u></b> (i.e. Aggregate of all Semester's in %)				
05	<b><u>Exemplary Contribution</u></b>				
	at GGU / District level & below				
	at State level				
	at Ministry/Dept. of Central Govt. Level				
	Certified at P MO/ President Office Level				
<b>Total Marks Obtained</b>					

Note: a brief biography of the selected student and certified documents of his/her achievements must be attached along with his/her applications.

It is forwarded for consideration by Concerned Dean / the Advisory Committee.

HOD  
(Signature and Seal)

Dean School of Studies  
(Signature and Seal)