



School of Planning  
and Architecture  
New Delhi

योजना तथा  
वास्तुकला विद्यालय  
नई दिल्ली

Form No. \_\_\_\_\_  
(for DPU use only)

SPACE FOR PASTING  
ONE RECENT  
PASSPORT SIZE  
PHOTOGRAPH  
(3.5 CM X 3.5 CM)  
SHOWING FRONTAL  
VIEW OF FULL FACE  
WITHIN THIS BOX

## APPLICATION FORM FOR IDENTITY CARD

(for Faculty/ Staff/ Visiting Faculty/Project Staff)

1.	<b>Name</b> (in capital letters only)	हिन्दी में:			
		In English:			
2.	<b>Card No.#</b>				
3.	<b>DOB</b>	<b>Day</b>	<b>Month</b>	<b>Year</b>	4. <b>Blood Group</b>
5.	<b>Category</b> (tick ✓ mark in the box)	<b>Faculty</b> <input type="checkbox"/>	<b>Staff</b> <input type="checkbox"/>	<b>Visiting Faculty</b> <input type="checkbox"/>	
		<b>Retired</b> <input type="checkbox"/>	<b>Project Staff</b> <input type="checkbox"/>		
6.	<b>Designation*</b>				
7.	<b>Department/Centre/ Section/Unit, etc.</b>				
8.	<b>DOJ# :</b>	____/____/____	9.	<b>DOR#:</b>	____/____/____
		Day Month Year			Day Month Year
10.	<b>Contact No.</b>	<b>Mobile</b>		<b>Res.</b>	
		<b>Landline</b>			
11.	<b>Email ID</b>				
12.	<b>Residential Address</b>				
13.	<b>Validity #</b>	From : ____/____/____ to ____/____/____			
		Day Month Year	Day Month Year		
	<b>Date:</b> ____/____/____	<b>Signature of the Applicant</b>			
	<b>Forwarded to issue the Identity Card</b>	<b>Signature of the Head of the Department</b>			
	<b>For the approval of Competent Authority</b>	<b>Library and Information Officer</b>			
	<b>Approved</b>	<b>Registrar</b>			
	<b>For DPU use Only :</b>	<b>Issued on</b>		<b>Not Issued</b>	

\* Please follow instructions as given overleaf.

# To be filled by the School.

## INSTRUCTIONS:

1. Please write your **full name** in both Hindi and English
2. Write your **card no.** allotted by the Establishment Section
3. DOB : Write your **Date of Birth** in numbers
4. Kindly mention your **Blood Group**
5. Mark your **Category** whether you are Faculty, Employee, Visiting faculty, Project Staff or Retired Employee
6. Kindly write your **Designation as of date**. In case of retired employee, please write designation as on date of retirement
7. Write the **Department/Centre/Section/Unit**, etc. where you are presently working
8. Please write your **Contact numbers** Mobile, Landline and Residential
9. Please write your **Email ID**
10. Please write your complete **Address with pin code**

**Note:** In case of loss of identity card, a request for reissue of identity card shall be submitted along with following documents

1. Filled in Application form,
2. Copy of FIR,
3. Copy of fee receipt (Rs.....)