







लक्ष्मीबाई राष्ट्रीय शरीरिक शिक्षा संस्थान, ग्वालियर Lakshmibai National Institute of Physical Education, Gwalior

Deemed to be University, Ministry of Youth Affairs & Sports, Government of India (Declared vide Govt. of India MHRD Notification NO. F.9-14/92-U.3 dated 21.09.1995 under section 3 of UGC Act, 1956)

я. ACAD/PLD/183/12/

NOTICE

All the provisionally selected candidates for Ph.D. are instructed to report at their respective study center i.e. LNIPE, Gwalior and LNIPE, Guwahati for registration and payment of fee on 15th and 16th January, 2025 from 10:00 AM to 4:00 PM. If the candidate does not submit the fee along with the registration form on above prescribed dates i.e. 15th and 16th January 2025, his/her provisional admission is liable to cancelled and the vacant seat will be filled from waiting list.

- 1. All relevant Mark Sheets of the qualifying examination.
- 2. JRF/ NET Certificate (Certificate as per the applicable Caste/PWD category)
- 3. Proof of date of birth.
- 4. Character certificate from the last attended Institute.
- 5. SC/ST/OBC-NCL/EWS/Kasmiri Migrants, if applicable, in prescribed format.
- 6. Declaration regarding non-creamy layer (applicable for OBC candidates only) in the prescribed format as per the rule of Govt. of India.
- 7. Migration Certificate from the Board/University/Institute last attended.
- 8. Affidavits of self and parents regarding Anti-Ragging as provided with the results.
- 9. Medical Fitness.

Note:- Format regarding point 8 and 9 is attached.

(Authority: Hon'ble Vice Chancellor's approval dated 10.01.2025)

I/c Registrar

Copy to:-

- Vice Chancellor's Secretariat
- Registrar Secretariat
- Controller of Examination
- All Deans
- Dean, NERC, Guwahati
- All Head of Departments
- Coordinatior ICT Please make arrangement for uploading on the Institute's Website.
- Institute Notice Board
- Students Notice Board
- Concerned File

FORMAT OF AFFIDAVIT BY THE STUDENT FOR ANTI-RAGGING

(This format shall be notarized on a stamp of Rs. 100/-)

 I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes rag I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aw administrative action that is liable to be taken against me in case I am found guilty of or abetting passively, or being part of a conspiracy to promote ragging. I hereby solemnly aver and undertake that a) I will not indulge in any behaviour or act that may be constituted as ragging under clause b) I will not participate in or abet or propagate through any act of commission or or constituted as ragging under clause 3 of the Regulations throughout the course. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9. without prejudice to any other criminal action that may be taken against me under any penal latime being in force. I hereby declare that I have not been expelled or debarred from admission in any institution in the of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further addeclaration is found to be untrue, I am aware that my admission is liable to be cancelled. Declared thisday of	are of the penal and ragging, actively or 3 of the Regulations. hission that may be 1 of the Regulations,
administrative action that is liable to be taken against me in case I am found guilty of or abetting passively, or being part of a conspiracy to promote ragging. 4) I hereby solemnly aver and undertake that a) I will not indulge in any behaviour or act that may be constituted as ragging under clause b) I will not participate in or abet or propagate through any act of commission or or constituted as ragging under clause 3 of the Regulations throughout the course. 5) I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9. without prejudice to any other criminal action that may be taken against me under any penal la time being in force. 6) I hereby declare that I have not been expelled or debarred from admission in any institution in the of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further at declaration is found to be untrue, I am aware that my admission is liable to be cancelled. Declared this	a ragging, actively or 3 of the Regulations. hission that may be 1 of the Regulations,
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without prejudice to any other criminal action that may be taken against me under any penal la time being in force. 6) I hereby declare that I have not been expelled or debarred from admission in any institution in the of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further addeclaration is found to be untrue, I am aware that my admission is liable to be cancelled. Declared this	
of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further at declaration is found to be untrue, I am aware that my admission is liable to be cancelled. Declared this	
Name:	
Name:	
Name:	are of deponent
VERIFICATION	are or deponent
Verified that the contents of this affidavit are true to the best of my knowledge and no part of the nothing has been concealed or misstated therein.	affidavit is false and
Verified at on this the of,	
Signa	ture of deponent
Solemnly affirmed and signed in my presence on this the	tare of deponent
OATH	-

FORMAT OF AFFIDAVIT BY PARENT/GUARDIAN FOR ANTI-RAGGING

(This format shall be notarized on a stamp of Rs. 100/-)

I, Mr./Mrs				
2)	I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.			
3)	I have also, in particular, perused clause 7 and clause 9.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.			
4)	I hereby solemnly aver and undertake that			
	a)	My ward will not indulge in any behaviour or act that may be constituted as a Regulations.	ragging under clause 3 of the	
	b)	My ward will not participate in or abet or propagate through any act of commis constituted as ragging under clause 3 of the Regulations throughout the course.	ssion or omission that may be	
5)	Regulat	y affirm that, if found guilty of ragging, my ward is liable for punishment actions, without prejudice to any other criminal action that may be taken against naw for the time being in force.	ecording to clause 9.1 of the ny ward under any penal law	
6)	I hereby declare that my ward has not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote, ragging; and further affirm that, in case the declaration is found to be untrue, the admission of my ward is liable to be cancelled.			
Declared thisday ofmonth ofyear.				
	,		Signature of deponent	
			Name:	
			Address:	
			Telephone/Mobile No.	
	٠.	VERIFICATION		
Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.				
Veri	ified at	on this the of		
			Signature of deponent	
Solemnly affirmed and signed in my presence on this the (day) of (month), (year) after reading the contents of this affidavit.				

FORMAT OF MEDICAL FITNESS CERTIFICATE

A candidate must be medically fit to undergo the Ph.D. Programme. The Medical fitness must be certified by a Registered Government Medical Officer in the prescribed proforma, as given bellow on a Letterhead:

CERTIFICATE OF MEDICAL FITNESS					
This is to certify that I have conducted clinical examination of Mr./Ms					
He/she has not given any personal history of any disease incapacitating him/her to undergo the Ph.D. Programme. Also, on clinical examination it has been found that he/she is medically fit to undergo the Ph.D. Programme.					
Though following deviations have been revealed, in my opinion, these are not impediments to pursue a Ph.D. Programme in Physical Education (if applicable)					
1					
2					
3					
Address of the Registered Govt. Medical Officer	Signature				
	Name				
	Registration No.				
	Seal of Registered Govt. Medical Officer				
Date:					