



**School of Planning
and Architecture**
New Delhi

योजना तथा
वास्तुकला विद्यालय
नई दिल्ली

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

* Please follow instructions as given overleaf.

To be filled by the School.