

DELHI TEACHERS UNIVERSITY

(A University Established by an Act of Govt. of NCT of Delhi and Recognized by UGC under Section 2(f))

Government of _____
(Name & Address of the authority issuing the certificate)

INCOME & ASSETS CERTIFICATE TO BE PRODUCED BY ECONOMICALLY WEAKER SECTIONS

Certificate No. _____

Date: _____

VALID FOR THE YEAR _____

This is to certify that Shri/Smt./Kumari _____ son/daughter/wife of permanent resident of _____, Village/Street Post Office _____ District _____ in the State/Union Territory _____ Pin Code _____ whose photograph is attested below belongs to Economically Weaker Sections, since the gross annual Income* of his/her family** is below Rs. 8 lakh (Rupees Eight Lakh only) for the financial year _____. His/her family does not own or possess any of the following assets***:

- I. 5 acres of agricultural land and above;
- II. Residential flat of 1000 sq. ft. and above;
- III. Residential plot of 100 sq. yards and above in notified municipalities;
- IV. Residential plot of 200 sq. yards and above in areas other than notified municipalities.

Shri/Smt./Kumari _____ belongs to the _____ caste which is not recognized as a Scheduled Caste, Scheduled Tribe and Other Backward Classes (Central List).

Signature with seal of Office _____

Name _____

Designation _____

***Note-1:** Income covered all sources i.e. salary, agriculture, business, profession, etc.

***Note-2:** The term, "Family" for this purpose include the person, who seeks benefit of reservation, his/her parents and siblings below the age of 18 years as also his/her spouse and children below the age of 18 year.

***Note-3:** The property held by a "Family" in different locations or different places/cities have been clubbed while applying the land or property holding test to determine EWS status.

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**(Fitness Certificate for availing Admission against Person with Benchmark
Disability (PwBD))**

(For Academic Session 2026-27)

(To be submitted at the time of Admission/Document Verification)

Certified that Shri/Km/Smt. _____ Son/daughter/wife of Shri/Smt.
_____ With Application No. _____ is Physically
Handicapped/Person with Disability due to _____ and he/she is fit
for undergoing the following course(s)/Programmes of Study(s):

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

At Delhi Teachers University for the Academic Session 2026-27.

Date of Issue:

Name _____

Designation _____

Signature _____

(with date)

Office Seal of the Issuing Authority

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Fitness Certificate for Person with Benchmark Disability (PwBD)

To be issued by Medical Board from Govt. Hospital
(To be submitted at the time of Admission/Document Verification)

Certified that Shri/Km/Smt. _____ Son/daughter/wife of Shri/Smt.
_____ With Application No. _____ is Persons with
Disability due to _____ percentage _____ and he/she is fit to
peruse the UG/PG/Mphil/PhD Studies.

Member (Orthopedic Specialist)
Member
Principal Medical Officer

Date: _____

Seal of Office

Note: The Certificate must be issued by Medical Board of any recognized Government Hospital.

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by UGC

**UNDERTAKING FROM RESULT AWAITED CANDIDATES FOR SEEKING
Provisional Admission for Academic Session 2026-27**

I/My Ward _____ (Name of the candidate),
Son/Daughter/Wife of _____ (Father's/Husband's name),
Resident of _____
(Permanent Address) seeking admission to _____ (Name of the Course) of
Delhi Teachers University, hereby solemnly affirm and declare:

1. that I/My ward have/has appeared in the final semester/final year _____ (name of the qualifying degree), B.A., B.Sc. etc.), Examination, 2026 of (Board/University) on or before 31st July 2026, the result of which has not yet been declared and is expected to be declared latest by 30th September, 2026**;
2. I have passed all the papers of the qualifying degree _____ examination other than the final year/final semester examination.
3. I have no compartment as on this date in my qualifying degree examination.
4. I am seeking provisional admission due to non-declaration of result of final year/final semester of the qualifying degree examination by Board/University and not on account of compartment in current or previous years of the qualifying degree examination as on date of admission.
5. That I/My ward have/has carefully gone through the rules regarding provisional admission and fully understand that in the event of my/my ward's failure to submit to the concerned Dean/Principal/Director of the concerned School/College where the admission has been granted, appropriate proof of my/my ward securing at least marks in the qualifying examination for admission to (Name of the Course) of Delhi Teachers University by 30th September, 2026*, my/my wards' provisional admission to the said course will automatically get cancelled and full fee deposited will be forfeited.

Verification:

Verified at _____ on this _____ day of _____, 2026 that the contents of the above Undertaking are true and correct to the best of my knowledge and belief. No part of it is false and nothing material has been concealed therefrom.

Notes:

- i) candidate is minor i.e. below 18 years of age; in that case, the Undertaking shall be signed by _____ his/her _____ parent/guardian.
- ii) Submission of false Undertaking is punishable offence. If it is found at any stage that false Undertaking was submitted, admission shall be cancelled and legal proceedings shall be initiated, for which candidate/parent/guardian shall be responsible.

*In view of the challenges brought about by Covid-19, any change in the procedures for personal appearance of applicants for entrance examinations/trials for CCA and Sports, as well as for verification of certificates shall be notified in due course by the Delhi Teachers University on its website.

Applicants are advised to monitor the same and act as directed.
** May change as per the result declaration notification by University before the cut off list.

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MEDICAL CERTIFICATE*

(FOR THE ACADEMIC SESSION 2026-27)

(TO BE SUBMITTED AT THE TIME OF ADMISSION/DOCUMENT VERIFICATION)

I certify that I have carefully examined Shri/Km/Smt. _____
son/daughter/wife of Shri/Smt. _____ whose signature is given
below. Based on the examination, I certify that he/she is in good mental and
physical health and is free from any physical defects which may interfere with
his/her studies including the active outdoor duties required of a professional.

Visible Mark of Identification _____

Signature of the Candidate _____

Place: _____

Date: _____

Name & Signature of the Medical Officer with Seal and Registration Number

- Strike whichever is not applicable.
** To be signed by a Registered Medical Practitioner holding a Medical
degree.

Note: Use photocopy of this Form.

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(UNDERTAKING BY STUDENT WITH RESPECT OF ANTI RAGGING)

I _____ S/D of Mr./Mrs./Ms. _____, having been admitted to, have received a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009, (hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

1. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
2. I have also, in particular, perused clause 5 and clause 6.1 of the Regulations and am fully aware of the penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
3. I hereby solemnly aver and undertake that:
 - (i) I will not indulge in any behave our or act that may be constituted as ragging under clause 3 of the Regulations.
 - (ii) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
4. I hereby affirm that, if found guilty of ragging, I am liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
5. I hereby declare that I have 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, I am aware that my admission is liable to be cancelled.

Declared this _____ day of _____ month of _____ year.

Signature of deponent

Name _____

Address _____

Telephone/Mobile No. _____

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.

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(UNDERTAKING BY PARENT/GUARDIAN WITH RESPECT OF ANTI RAGGING)

I, Mr./Mrs./Ms. _____ full name of parent/guardian
father/mother/guardian of, (full name of student with
admission/registration/enrolment number), having been admitted to (name of the
institution), have received a copy of the UGC Regulations on Curbing the Menace of
Ragging in Higher Educational Institutions, 2009, (hereinafter called the
"Regulations"), carefully read and fully understood the provisions contained in the
said Regulations.

1. I have, in particular, perused clause 3 of the Regulations and am aware as to what constitutes ragging.
2. I have also, in particular, perused clause 5 and clause 6.1 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.
3. I hereby solemnly aver and undertake that:
 - (i) My ward will not indulge in any behave our or act that may be constituted as ragging under clause 3 of the Regulations.
 - (ii) My ward will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under clause 3 of the Regulations.
4. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
5. 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 this _____ day of _____ month of _____ year.

Signature of deponent

Name _____

Address _____

Telephone/Mobile No. _____

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.

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UNDERTAKING

I, _____
S/o, D/o _____ do hereby undertake that I will submit the
following documents at Delhi Teachers University (date to be notified on University
website).

SL Name of the Document

I fully understand that if I do not submit the above said certificate and marks
sheets my provisional admission will be cancelled.

Dated: _____

Signature: _____

Name in (Block Letters) _____

Address _____

Mobile No. _____

E-mail ID _____

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UNDERTAKING

I hereby undertake the following:

1. I will attend the classes regularly in each semester as per requirement of University Ordinance and in case I fail to fulfil this obligation, Delhi Teachers University would be within its right to strike off my name from the rolls. I shall also be responsible to see all the notices displayed on the Notice Board/Email/Website of the university from time to time.
2. Any excess payment that may be found to have been made as a result of incorrect Scholarship, SWF, Caution Deposits, refunds, etc. or any excess payment detected in the light of discrepancies noticed subsequently will be refunded by me to the University, without raising any objection to it.
3. If there is any change of information submitted in application (such as residence, contact no. etc), I shall inform the University accordingly.

Dated: _____

Name: _____

(Signature of the Candidate)

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UNDERTAKING

{Strike out whichever is not applicable}

1. I _____ (Name of the candidate) herewith undertake that I have read all the rules of admission for the year 2026-27 and after fully understanding all the rules, I have filled in this application form for admission for the current academic year.
2. I belong to _____ category which is recognized as SC/ST Category in _____ state vide G.R No. _____ dated _____. The serial no. of my caste is _____ and submitting the caste vide certificate issued by _____ Vide No. _____ dated _____.
3. I belong to OBC/PwD category and based on this, I am herewith submitting the caste certificate/PwD issued by _____ vide No. _____ dated _____.
4. I belong to Unreserved/General category.
5. The information given by me in application form is true to the best of my knowledge and belief.
6. If at any stage, it is found that I have furnished wrong information and/or submitted false certificate(s), I am aware that my admission stands cancelled and fees paid by me will be forfeited. Further, I will be subject to legal and/or penal action as per the provision of the law.
7. I hereby agree to confirm to any Rules, Acts and Laws enforced and I hereby undertake that so long as I shall be a student of the University I will do nothing either inside or outside the University which may result in compelling the authorities to take disciplinary action against me under the Rules, Acts and Laws of good conduct and behavior in general.

Signature of the Candidate