



Form B  
(UG)

INDIAN INSTITUTE OF TECHNOLOGY DELHI  
Undertakings of awareness of academic rules at IIT Delhi

1. Undertaking by student

I .....son/daughter/ward of

Mr./Ms.....Entry No..... will go

Through the "Prospectus" and "Courses of Study" for the academic year 2020-2021 available on the IITD website at <http://www.iitd.ac.in/content/curriculum-info>. I hereby give an undertaking that I shall abide by the rules and regulations of the Institute in general and specifically regulations stated in the Courses of Study 2020-2021 and any modifications/ additions to those, which may be duly notified by competent authority.

I am also aware that at the end of the 1<sup>st</sup> two registered semesters (1<sup>st</sup> year), if my earned credits (excluding Non Graded Units) are **less than** the required credits for continuation of registration as stated in the **Courses of Study** (23 for General/OBC/EWS; 19 for SC/ST/PwD), then my registration will be terminated or if I and my parents/guardian agree, I will be given only one chance to restart the first year.

**(For details please refer to section 4.6 of the Courses of Study (2020-2021), a part of which is provided in Annexure to Form B for ready reference)**

Date

Signature of the Student

2. Undertaking by Parent/Guardian

I.....father/mother/Guardian of

Mr./Ms.....Entry No..... declare

that my son/daughter/ward will go through the "Prospectus" and "Courses of Study" for the academic year 2020-2021 available on the IITD website. I also give an undertaking that I will regularly monitor the academic performance of my son/daughter/ward through semester grade card available from the *Parent Login* link at <http://academics.iitd.ac.in> after creating a *User ID and password*. I am also aware that I can request a copy of the Grade Card from DR/AR (UGS) by sending a mail at [drugs@admin.iitd.ac.in](mailto:drugs@admin.iitd.ac.in).

***I also agree to visit the Institute as and when called by the authorities.***

I am also aware that at the end of the 1<sup>st</sup> two registered semesters (1<sup>st</sup> year), if the credits earned (excluding Non Graded Units) by my ward are **less than** the required credits for continuation of registration as stated in the table overleaf (23 for General/OBC/EWS; 19 for SC/ST/PwD), then my ward's registration will be terminated or if my ward and I agree, my ward will be given only one chance to restart the first year **(For details please refer to section 4.6 of the Courses of Study (2020-2021), a part of which is provided in Annexure to Form B for ready reference)**

Date:

Signature of the Parent/Guardian

Mobile No.\_\_\_\_\_

## Annexure to Form B

### Reproduced from section 4.6 of Courses of Study 2020-2021.

#### 4.6 Conditions for Continuation of Registration, Termination / Re-start, Probation and Warning

During the first two registered semesters of an undergraduate programme, a student is registered for a total of 34 credits, besides non-graded units. By the end of the first two registered semesters, not including summer, a student is expected to earn a minimum number of credits (excluding non-graded units) as specified in Table, in order to continue registration. If a student does not meet this criterion, his/her performance is classified as "Poor Performance", and he/she may opt to start the programme afresh, or else his/her registration will be terminated. This option to re-start the programme is available to a student only once.

**Table 8: Criteria for continuation at the end of second registered semester**

Description	Earned Credits (excluding non-graded units)		Decision
	GEN/OBC/EWS	SC/ST/PwD	
Minimum for Continuation	23	19	Continuation of Registration
Poor Performance	≤ 22	≤ 18	Restart (Once only) / Termination of Registration

- (a) If a student chooses to restart after the first two registered semesters, then his / her credits earned and semesters registered will not be carried over. The re-start will be indicated on the transcript. The re-start will be permitted only once. If at the end of two registered semesters after re-start, the earned credits are less than or equal to 22 for GE/OBC/EWS or less than or equal to 18 for SC / ST / PwD students, then the registration

Will be terminated.

- (b) Each student is expected to earn at least 12 credits in each registered semester with an SGPA greater than or equal to 5.0. If the performance of a student at the end of any Registered semester is below this minimum acceptable level, then he/she will be placed On probation, a warning shall be given to him/her and intimation sent to the parents.

- (c) A student placed on probation shall be monitored, including mandatory attendance in classes, special tutorials and mentoring. Mentoring would comprise structured guidance under a senior/postgraduate student.
- (d) If the performance of a student on probation does not meet the criterion in item (b) in the following registered semester, then the student would face termination, and will be permitted to register by the Dean, Academics only if the department makes a favorable recommendation. The Head of the Department's recommendation shall be prepared after consultation with the student, and should include (i) feasibility of completing the programme requirements, and (ii) identification of remedial measures for the problems leading to poor performance.
- (e) The registration of any student will be limited to 1.25 times the average earned credits of the previous two registered semesters, subject to a minimum of 12 credits and a maximum of 26 credits.



# INDIAN INSTITUTE OF TECHNOLOGY DELHI

Form C  
(UG)

## FAMILY INCOME STATEMENT

(Only for U.G. Students)

NAME OF THE STUDENT \_\_\_\_\_ ENTRY NO. \_\_\_\_\_

CATEGORY \_\_\_\_\_ HOSTEL ALLOTTED *(to be left blank)* \_\_\_\_\_

JEE RANK \_\_\_\_\_

STUDENT'S MOBILE NO. \_\_\_\_\_

STUDENT'S AADHAR No. \_\_\_\_\_ STUDENT'S PAN No. \_\_\_\_\_

### ANNUAL FAMILY INCOME

	Source of Income	Aadhar No	PAN No.	Employment Status	Total Annual Income
a	Father			Self employed /Service/ Other (Pl. specify) _____	
b	Mother			Self employed /Service/ Other (Pl. specify) _____	
c	Any other Family Income				
<b>Grand Total</b>					

**IMPORTANT: If the annual family income is Rs 9 lakhs or less, this form must be submitted ALONG with Supporting Documents as applicable according to the following table:**

Source of Family Income	Supporting Documents to be submitted (pertaining to All the earning members of the family)
Salary Only	1. Copy of Income Tax Return (ITR)/ Form-16 AND <b>Income Certificate*</b> 2. Copy of Aadhar card 3. Copy of PAN card
Self Employment Only	1. Copy of Income Tax Return (ITR) AND <b>Income Certificate*</b> 2. Copy of Aadhar card 3. Copy of PAN card
Salary and Other Sources	1. Copy of Income Tax Return (ITR) AND <b>Income Certificate*</b> 2. Copy of Aadhar card 3. Copy of PAN card
BPL card holders	1. Attested copy of the BPL card 2. Copy of Aadhar card 3. Copy of PAN card

**\*Income Certificate : The Format of the income certificate should be as given in the Form D.**

*The income certificate should be duly signed ON ALL PAGES by a First Class Magistrate/ S.D.O./B.D.O/TEHSILDAR of the district of residence. Income Certificate signed by Notary/Oath Commissioner will NOT be accepted. The students are advised to keep a photocopy of the Income Certificate submitted at IIT Delhi for future reference.*

(SIGNATURE OF THE STUDENT)

(SIGNATURE OF THE PARENT/GUARDIAN)



(FORMAT OF INCOME CERTIFICATE)

Form D  
(UG)

INCOME CERTIFICATE

Name of Student: .....Entry No .....

Category (Gen/OBC/EWS/SC/ST/PwD).....

I,....., father/mother/guardian of Mr./Ms.....  
declare that my/our annual income from all sources e.g. service/ agricultural/ trading/ pension/  
interest/ ..... (specify all types of other sources) including that of my spouse and  
unmarried children is Rs.....(Rupees .....  
only). The details are as follows:

- (A) 1. From my profession/ Salary/ pension as indicated Rs.\_\_\_\_\_ p.a.  
(Attach proof from employer/ Form 16/ IT Return etc.)  
2. Income from Business/ Medical Practice Legal Practice/ Engineering Consultancy etc.  
Rs.\_\_\_\_\_ p.a.  
3. Income from Agriculture Rs.\_\_\_\_\_ p.a.  
4. Income from land Properties Rs.\_\_\_\_\_ p.a.  
5. Income from Investment in Bank/ Post Office etc Rs.\_\_\_\_\_ p.a.  
6. Income from Share Certificate/ Debentures Rs.\_\_\_\_\_ p.a.  
7. Income from any other sources  
(i.e. Retirement Benefits for VRS/ VSS etc. if any) Rs.\_\_\_\_\_ p.a.
- (B) Income of my wife/ husband (if any) Rs.\_\_\_\_\_ p.a.  
(if employed salary certificate employer / Form 16 to be enclosed)
- (C) Income in the name of my son/ daughter Rs.\_\_\_\_\_ p.a.
- GROSS TOTAL INCOME (A+B+C) Rs.\_\_\_\_\_ p.a.**

Further I declare that the information given above is true. I understand that in case this information is found to be incorrect, the Merit-cum Means Scholarship/Freeship/Free Messing/Scholarship, if awarded to my son/ daughter, is liable to be withheld or discontinued at the discretion of the authorities of the Indian Institute of Technology Delhi without assigning any reason. If subsequently (after award of the Scholarship to my ward) it is found that he/she has been granted any other Scholarship/ Stipend/ Financial Assistance etc. by any Govt./ Non-govt. organisation for the same period, I shall be bound to refund the whole amount of Scholarship / Stipend/ Financial Assistance etc. to the scholarship awarding authority immediately. I shall also be personally held responsible for the refund of the Scholarships amount (paid to my son/ daughter by the Institute) in the event of any information in this declaration being found incorrect/ false later on.

(Signature of Father/Guardian)

Sworn before me this \_\_\_\_\_ day of \_\_\_\_\_ 202\_ and signed.

(SEAL with date) \_\_\_\_\_  
Signature of First Class Magistrate/ S.D.O./B.D.O./ TEHSILDAR  
or any other Revenue officer of the district of the signatory.

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*Note: The income certificate should be duly signed ON ALL PAGES by a First Class Magistrate/ S.D.O./B.D.O/TEHSILDAR of the district of residence. Income Certificate signed by Notary/Oath Commissioner will NOT be accepted.*

*The students seeking Institute scholarships and any other Donor scholarship must submit "The Income Certificate" to the Academics (UG) section before end of July every year, failing which their scholarship will not be released. For this purpose, income certificate is to be submitted by the Parent(s) whether in business/employment or in service with Private/Government organization.*



## INDIAN INSTITUTE OF TECHNOLOGY DELHI

### THE HONOUR CODE

I \_\_\_\_\_, Entry No. \_\_\_\_\_, do hereby undertake that as a student at IIT DELHI:

- (1) I will not give or receive aid in examinations; that I will not give or receive unpermitted aid in class work, in preparation of reports, or in any other work that is to be used by the instructor as the basis of grading; and
- (2) I will do my share and take an active part in seeing to it that others as well as myself uphold the spirit and letter of the *Honour Code*.

I realize that some examples of misconduct which are regarded as being in violation of the *Honour Code* include:

- copying from another's examination paper or allowing another to copy from one's own paper;
- unpermitted collaboration;
- plagiarism;
- revising and resubmitting a marked quiz or examination paper for re-grading without the instructor's knowledge and consent;
- giving or receiving unpermitted aid on take-home examinations;
- representing as one's own work the work of another, including information available on the Internet; and
- giving or receiving aid on an academic assignment under circumstances in which a reasonable person should have known that such aid was not permitted.
- committing a cyber offence, such as, breaking passwords and accounts, sharing passwords, electronic copying, planting viruses, etc.

I accept that any act of mine that can be considered to be an *Honour Code* violation will invite disciplinary action.

Date: \_\_\_\_\_

Student's signature \_\_\_\_\_

Name \_\_\_\_\_

Entry No. \_\_\_\_\_

#### **NOTE TO THE STUDENT**

Upload signed and scanned copy during Online Registration.  
Keep the original signed copy with you

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# INDIAN INSTITUTE OF TECHNOLOGY DELHI

**FORM F  
(UG)**

## BENEVOLENT FUND SCHEME FORM FOR NOMINATION BY STUDENTS

I hereby nominate the person mentioned below, who is a member of my family, to receive amount of out-right "grant" as per prescribed rate laid down in the Benevolent Fund Scheme Rules (BFSR) in the event of my death due to an accident while undergoing studies at the Institute.

<b>Name and Address of the Nominee</b>	<b>Relationship with member-student of BFSR</b>	<b>Age</b>
<hr/>		
<hr/>		

Dated this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (Place).

\_\_\_\_\_  
Signature of Member-student of Benevolent Fund

Entry No.: \_\_\_\_\_ Student Name: \_\_\_\_\_

### Witnesses to the signature of the Member-student:

1. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Signature \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

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**For official use**

Accepted \_\_\_\_\_

Signatures \_\_\_\_\_

Designation \_\_\_\_\_



INDIAN INSTITUTE OF TECHNOLOGY DELHI

INSURANCE SCHEME OF IIT DELHI FORM FOR NOMINATION BY STUDENT

Note: All UG & PG students enrolled at IIT Delhi are covered under Vidyarthi (Group) Mediclaim Personal Accident Insurance Policy upto Rs. One lakh only. This policy is operated by M/s. National Insurance Co. Ltd. New Delhi. In case of hospitalization the treatment can be availed from all major (Regd.) hospitals all over the country via cashless facility or reimbursement of the expenses may be claimed from M/s. National Insurance Co. Ltd.

Name of Student \_\_\_\_\_

Entry No. \_\_\_\_\_

Programme \_\_\_\_\_

Mother's Name \_\_\_\_\_

Father's Name \_\_\_\_\_

Permanent Address \_\_\_\_\_

\_\_\_\_\_

I, having been covered under the Insurance Scheme of I.I.T. Delhi, hereby nominate the persons mentioned below, who are members of my family to receive the amount of insurance in the event of my death.

Name and address of \_\_\_\_\_ Relationship with student Age

1st Nominee \_\_\_\_\_

2nd Nominee \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Signature of student \_\_\_\_\_

Present Address \_\_\_\_\_ (of student)

\_\_\_\_\_

Witness signatures (other than nominee) \_\_\_\_\_

1. Signature \_\_\_\_\_ Name \_\_\_\_\_

2. Signature \_\_\_\_\_ Name \_\_\_\_\_

(in capitals) Address \_\_\_\_\_

(in capitals) Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

For details and the list of hospitals, please see http://www.safewaytpa.in In case of emergency, one may directly contact Mr. Rahul Vij: 9212231982





Form H-1  
(UG)

INDIAN INSTITUTE OF TECHNOLOGY DELHI

HOSTEL NAME: .....  
(To be left blank)

- 1. NAME OF THE STUDENT: - .....
- 2. ENTRY NO. :- .....
- 3. DATE OF JOINING THE HOSTEL : (to be left blank).....
- 4. ROOM NO. (To be filled by the caretaker of Hostel) : .....
- 5. MOBILE NO. OF STUDENT :- .....
- 6. STUDENT EMAIL ID :- .....
- 7. NAME OF FATHER:- .....
- 8. NAME OF MOTHER:- .....

Affix latest  
passport size  
photograph  
here

PARENTS' OFFICE ADDRESS		PARENTS' RESIDENTIAL ADDRESS
FATHER	MOTHER	
TEL/MOB NO.:		Res. Phone No.:
EMAIL ID:		

LOCAL GUARDIAN'S OFFICE ADDRESS	LOCAL GUARDIAN'S RESIDENTIAL ADDRESS
TEL/MOB NO.:	Res. Phone No.:
EMAIL ID:	

CONTACT ADDRESS IN CASE OF EMERGENCY:-

TEL/MOBILE NO.:-

BLOOD GROUP :- .....

In case any of the phone numbers or addresses change, I agree to inform the hostel about the same at the earliest possible.

SIGNATURE OF THE STUDENT



Form H-2  
(UG)

INDIAN INSTITUTE OF TECHNOLOGY DELHI

**UNDERTAKING BY THE STUDENT**  
*(Only for those who have been allotted Hostel)*

I, (Name) \_\_\_\_\_

Entry No. \_\_\_\_\_ and resident of \_\_\_(to be left blank)\_\_\_\_\_

hostel hereby authorize Dean (Student Affairs)/Warden to debit my Hostel Mess dues directly from my Savings Bank (S/B) Account which is maintained in State Bank of India (SBI), IITD or SBI, \_\_\_\_\_(place) with core banking facility, as and when the same is due. I shall maintain sufficient balance in my S/B Account to enable debiting of the Hostel Mess dues directly from my S/B Account.

Signature of the Student

In case my ward doesn't pay the hostel advance for Mess in time, I hereby agree that hostel authorities can take suitable action against him/her. Also, the seat allotted to him/her can be cancelled.

Signature of the Parent/Guardian

Name of the Student : \_\_\_\_\_

Entry No. \_\_\_\_\_

SBI A/c No. \_\_\_\_\_ Branch \_\_\_\_\_

Date: \_\_\_\_\_

**Note:** Students having minor Savings Bank Account in State Bank of India (SBI) under guardianship of the parents at the time of admission in IITD must remove the "under-guardianship" from the account and make the account in the name of the student. Else he/she must open a new Savings Bank Account in SBI as and when they attain the age of 18 years and should submit that bank account number to the caretaker of the concerned hostel for updating in the system for future transactions.



INDIAN INSTITUTE OF TECHNOLOGY DELHI

Form H-3 (UG)

Undertakings by the Student (Only for Full-time Students)

Undertaking of awareness of medical facilities at IIT Delhi Hospital by the Student

I.....Entry No .....hereby declare the following in respect my admission to Undergraduate Programme of study at IIT Delhi.

I am aware of the following facts:

- (i) The IIT Delhi Hospital, located in the campus and run by IIT Delhi for its community, has limited facilities.
(ii) The IIT Delhi Hospital may not be adequate for treatment of a patient with chronic or serious ailments.
(iii) If required, I will get treated outside IIT Delhi on my own responsibility.
(iv) Each student would be provided a limited health insurance through a professional company. However, dealing with that company would be entirely the responsibility of the student. IIT Delhi, in no way, would be responsible for any dispute/discrepancy.

Despite the best efforts on the part of IIT Delhi, if any untoward incident happens to me, I shall not hold the Institute accountable for the same and will not seek any financial help or compensation for the same from any court of law.

Date:

Signature of the Student

2. Undertaking by the student for not owning and/or using motor driven vehicles on IIT Delhi campus (for Hostel residents only):

I.....son/daughter/ward of Mr./Ms..... Entry No.....hereby give an undertaking that I will not own/drive motor driven vehicle on campus during my stay at IIT Delhi. If at any stage I am found to violate the above undertaking, my hostel seat will stand automatically cancelled. I also undertake that any visitor bringing a vehicle would follow guidelines for registering the vehicle at the hostel security and I would be liable for punishment for any violation on this account

Date:

Signature of the Student

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INDIAN INSTITUTE OF TECHNOLOGY DELHI

**Undertaking from the students as per the provisions of  
Anti-ragging verdict by the Hon'ble Supreme Court**

I,..... Entry No.....

Programme.....Department.....

as Student of Indian Institute of Technology Delhi do hereby undertake on this day  
.....month..... year..... the following with respect to above

subject and Hon'ble Supreme Court Order No. (available at <http://dos.iitd.ac.in/antiragging.php>)

- 1) That I have read and understood the directives of the Hon'ble Supreme Court of India on Anti-ragging and the measures proposed to be taken in the above references.
- 2) That I have understood the meaning of Ragging and know that the Ragging in any form is a punishable offence and the same is banned by the Court of Law.
- 3) That (a) I have/ (b) I have not been found or charged for my involvement in any kind of ragging in the past. In case of (a), I will inform in writing to the Dean of Students before registration. In case of (b), I undertake to face disciplinary action/ legal proceedings including expulsion from the Institute if the above statement is found to be untrue or the facts are concealed, at any stage in future.
- 4) That I shall not resort to ragging in any form at any place and shall abide by the rules/ laws prescribed by the Courts, Govt. of India and the Institute authorities for the purposes from time to time.

.....  
Signature of Student

Name.....

I hereby fully endorse the undertaking made by my Son/Daughter/ward.

Witness Name : .....

.....  
Signature of Mother/ Father and/ Guardian



# INDIAN INSTITUTE OF TECHNOLOGY DELHI

## NOTICE

**This is to bring the following to the notice of all the students of IIT Delhi**

1. (i) **SMOKING** is **STRICTLY PROHIBITED** in ANY PUBLIC PLACE in the IITD Campus.  
(ii) In addition, **SMOKING** is **STRICTLY PROHIBITED** in the hostels including the hostel rooms.
2. (i) Consumption of alcohol by persons of age less than 25 years is **ILLEGAL** anywhere in Delhi and Haryana.  
(ii) Consumption of alcohol is **STRICTLY PROHIBITED** in any **PUBLIC PLACE** in the IITD campus.  
(iii) Consumption of alcohol is **STRICTLY PROHIBITED** in the hostels including the hostel rooms.
3. (i) **According to Narcotic Drugs and Psychotropic Substances Act, 1985 (NDPS), the cultivation /production/ manufacture, possession, sale, purchase, transport, storage, consumption, or distribution of total of 237 banned substances\* are illegal with penalty as listed in the table below:**

(\*such as: Marijuana/cannabis/Hash/Weed/Pot/Hemp; Cocaine; Heroine/brown sugar; LSD/Acid/"Mushrooms"; Opium; Ecstasy/MDMA; Amphetamines ("speed"); Codein; Solvent Glues/Aerosol etc.)

Offence	Penalty
Possession, sale, purchase, or use of drugs (varying in quantity)	Rigorous imprisonment from 6 months-10 years or fine of Rs. 10,000-1 lakh
Knowingly allowing one's premises to be used for committing an offence	Same as for the offence of above mentioned drugs
Financing traffic and harboring offenders	Rigorous imprisonment of 10-20 years + Fine of Rs.1-2 lakhs
Preparation to commit an offence	Half of the punishment of offence
Consumption of Drugs	Rigorous imprisonment of 6 months - 1 year + fine of Rs. 10,000-20,000 and involuntary treatment, if addicted

**IIT Delhi has ZERO TOLERANCE for drug abuse on campus. Students found to be involved in possession, sale, purchase or use of illegal drugs will be STRICTLY prosecuted under the law.**

### UNDERTAKING

I, (Name) \_\_\_\_\_ Entry No. \_\_\_\_\_  
and resident of *(to be left blank)* \_\_\_\_\_ hostel (Please write "NA" if you are not in the hostel)  
hereby declare that I have carefully read the above and understand that

\_\_\_\_\_  
\_\_\_\_\_

(Please write the following in your own handwriting in the space above):

**“ANY VIOLATION OF THE ABOVE CAN LEAD TO EXPULSION FROM THE HOSTEL AND EVEN THE INSTITUTE.”**

Date: \_\_\_\_\_

(Signature of the Student)