



THROUGH HUMANITY TO PEACE



Indian Red Cross Society

(CONSTITUTED UNDER ACT XV OF 1920)

Telefax : 91-11-23717454
Phones : (PBX Lines) 23716441, 42, 43
Website: www.indianredcross.org
Email : ircs@indianredcross.org

Headquarters :
1, RED CROSS ROAD
NEW DELHI - 110 001

No.A-33018/PGDP&R/2018-19

प्रमुख अधिकारी
आवृत्ति सं. 10932
दिनांक 1.9.18
प्रमुख अधिकारी
निदेशक (कार्य एवं स्था.)
निदेशक (अनुसंधान)
एच.एस.एस. अधिकारी
1.9.18

CIRCULAR

Sub: Admission to the 13th batch (2018-19) of one year (Part-time) Post Graduate Diploma course in Disaster Preparedness and Rehabilitation, affiliated to Guru Gobind Singh Indraprastha University (GGSIU), Delhi.

A. Introduction:

Indian Red Cross Society (IRCS) was established by the Parliament under the Indian Red Cross Society Act XV of 1920. As per the mandate, IRCS is an auxiliary to the State and to the Armed Forces Medical Services in their humanitarian pursuits.

2. The Indian Red Cross Society (IRCS) is the leading statutory humanitarian organization in the country having a network of 35 State/Union Territories Branches with their more than 700 district/sub-district/Tehsil branches across India.

3. IRCS is engaged in Disaster Relief, Response & preparedness, Community Services, Training, Blood services, Health sector and care of community.

4. The Hon'ble President of India is the President of the Society and the Hon'ble Union Minister for Health & Family Welfare is its Chairman. In the states, the Hon'ble Governor is the President and in the District, the Deputy Commissioner/District Magistrate is the President of the district branch of the Red Cross.

B. Regarding the Course:

The IRCS is conducting a One Year (Part Time) Post Graduate Diploma Course in Disaster Preparedness and Rehabilitation since 15th Sept 2006. This course is affiliated to the GGSIP University, Delhi.


2. The objective of the course is to develop a cadre of experts in the departments which they serve, who would in times of need, respond to disasters efficiently and effectively. This course further aimed to strengthen capacity of the officials working in the various departments. The IRCS gives preference to sponsored candidates from the Government, International Organizations, Partner National Societies (PNSs), Local bodies, etc. So far, IRCS 352 persons have been trained in the last 12 batches. The majority of them were nominated.

5th Level
Dy No. 182/2018/22827
Date 04/09/2018

SS(PWD)
GNC
M
19

3. A copy of the application form for the 13th batch scheduled to commence from Monday, the 15th October 2018 is enclosed. The same is also available at the website www.indianredcross.org/education.htm. The last date for receipt of application along with processing fees of Rs.500/- in IRCS (NHQ) is 10th October, 2018. The course fee is Rs. 27,000/-.

4. You are requested to kindly consider sponsoring suitable candidates for the course.



(Dr. Veer Bhushan)
Joint Secretary

Email: jointsecretary@indianredcross.org,
Phone No.: 011-23710429

Encl. as above

To
Principal Secretary
DEPARTMENT OF PUBLIC WORKS
(Govt. of NCT of Delhi),
5th Level, B-Wing, Delhi Secretariat,
I.P. Estate, New Delhi-110002

कार्यालय प्रमुख अश्रम, लो० नि० वि०
सं० डी० न० सी०/पी०/ए०/१२०१८/ ५२२५ दि० १०/११/१८
प्रतिकारि:- सूचना एवं आवेदनक का प्रवाही हेतु धरि-
१) लो० नि० वि० नई दिल्ली की वेबसाइट।

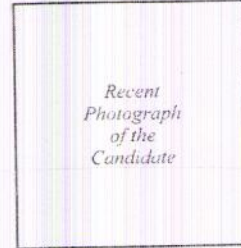

सहायक प्रशासनिक अधिकारी
कार्यालय प्रमुख अभियंता
लो० नि० वि०, दिल्ली सरकार
12वां तल, पुलिस मुख्यालय,
नई दिल्ली-110002

१०/११/१८



Application Form

1. a. Name in Full (in Block letters) : _____
(As in 10th exam certificate) (in English)
- b. Name in Full (in Hindi) : _____
2. a. Father's Name (in English) : _____
- b. Father's Name (in Hindi) : _____
3. a. Mother's Name (in English) : _____
- b. Mother's Name (in Hindi) : _____
4. Nationality (Foreign Nationals should give their Passport Details) : _____



Passport No.	Place/Date of Issue	Date of Expiry

5. Date & Place of Birth : _____
6. Address for Correspondence : _____

	Official	Residential
House No. & Name of the Institution		
Street / Place		
District		
State		
Country		
PIN		
Fax:	Ph.(O) Ph.(R) Mobile	E-mail:

7. Sex : Male Female

8. Visible Mark of Identification :



Application Form

12. Sponsoring organization activities and relevance of your attending the course :

13. Sponsoring status (Tick Mark in the appropriate Box)

- Self Sponsored
- Sponsored by Government/Private/Autonomous Organization

Signature of the Candidate

Date : _____

Place : _____

- * The Candidates should send a Demand Draft of Rs. 500/- (Rupees Five Hundred Only) payable to **The Secretary General, Indian Red Cross Society, National Headquarters, New Delhi-110001** as processing fee (non refundable), alongwith application form.
- * The selected candidates should submit the course fee (non refundable) through a Demand Draft of Rs.27,000/- payable to **The Secretary General, Indian Red Cross Society, National Headquarters, New Delhi - 110001**
- * Selected candidates sponsored by Government / Autonomous / Private Organizations will be required to submit the enclosed certificate alongwith a Demand Draft of Rs. 27,500/- (Rs. 27,000/- as course fee & Rs. 500/- as processing fee) payable to **The Secretary General, Indian Red Cross Society, National Headquarters, New Delhi - 110001**

N.B. Attach attested copies of certificates of all examinations and mark sheets.

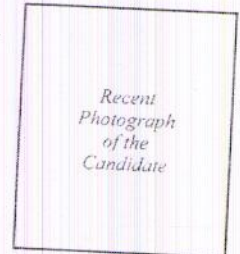
Originals should be shown at the time of admission with 7 recent passport size photograph including 2 photographs of size 2" x 1½" in colour showing frontal view of full face with white background.

The application form can be downloaded from the internet (www.indianredcross.org)



Nomination/Sponsoring Form

Certified that Mr. / Ms. / Dr. _____
has been officially deputed for PG Diploma Course in Disaster
Preparedness and Rehabilitation in the Indian Red Cross Society, 1 Red
Cross Road, New Delhi - 110001 during the Year: 2018-2019 . :



Recent
Photograph
of the
Candidate

which is a Central Government Organization/State Government Organization/University/
Private/Autonomous Body

Place : _____

Signature of Sponsoring Authority

Date : _____

Name : _____

Designation : _____

Address of the Organization :

Phone No. : _____

Fax No. : _____

E-mail : _____

