



## નગર પ્રાથમિક શિક્ષણ સમિતિ અમદાવાદ

પરિપત્ર નં. ૨૩ તા. ૨૨-૬-૧૮

ફક્ત મ્યુનિ. શાળાઓ માટે જ :-

આથી મ્યુનિ. શાળાના તમામ મુખ્ય શિક્ષકશ્રીઓને જણાવવાનું કે, આપની શાળામાં ફરજ બજાવતા આસિ. શિક્ષકશ્રીઓ તથા પગીઓ જેઓ પગારમાં સી.પી.એફ.ની કપાત ધરાવતા હોય તેઓના સી.પી.એફ.ના નવા ખાતા ખોલવાના છે તેવા કર્મચારીઓને આ સાથે સામેલ "નેશનલ પેન્શન સીસ્ટમ (NPS)" રજીસ્ટ્રેશન ફોર્મ ડાઉનલોડ કરી, ભરી તથા જરૂરી પુરાવા સામેલ કરી અત્રેની મુખ્યઓફિસમાં જી.પી. ફંડ વિભાગમાં મોકલી આપવાનું રહેશે. આ સાથે સામેલ NPS રજીસ્ટ્રેશન ફોર્મ ફક્ત અત્રેના ખાતામાં નિમણૂક પામેલ કર્મચારીઓ માટે જ છે. જીલ્લા ફેરબદલીથી આવેલ શિક્ષકો જેવા કે, અગાઉના જીલ્લામાંથી સી.પી.એફ. એકાઉન્ટ નંબર મેળવેલ છે તેઓને આ ફોર્મ ભરવાના થતા નથી. જેની નોંધ લેશો.

NPS રજીસ્ટ્રેશન ફોર્મ ભરવા અંગેની અગત્યની જરૂરી સુચનાઓ નીચે મુજબ છે. જે અચૂક અનુસરવી.

૧. ફોર્મ અંગ્રેજી કેપીટલ શબ્દોમાં કાળી શાહીથી જ ભરવું.
૨. ફોર્મમાં મોબાઇલ નંબર (હાલમાં જે વાપરતા હોય તે) તથા ઈ-મેઇલ એડ્રેસ અચૂક લખવા.
૩. ફોર્મ સાથે એક આઈ-ડી પ્રુફ, એક એડ્રેસ પ્રુફ, છેલ્લી પગાર સ્લીપ (નકલો) તથા એક કેન્સલ ચેક સામેલ કરવા.
૪. ફોર્મમાં માંગેલ આધારકાર્ડ નંબર લખવો ફરજિયાત છે.
૫. ફોર્મમાં વારસદારની વિગત અચૂક ભરવી.

આ અંગે વધુ માર્ગદર્શનની જરૂર હોય તો અત્રે મેડિકલ ક્લાર્કશ્રી વૈભવકુમાર સોલંકીનો સંપર્ક કરવો.

તા. ૨૨-૦૬-૧૮

ડૉ. એલ.ડી.દેસાઈ  
શાસનાધિકારી

અગત્યની નોંધ :-

પરિપત્ર નં. ૨૨-A તા. ૨૧-૬-૧૮ અનુસાર GSDMA તરફથી 'ગુજરાત શાળા સલામતી કાર્યક્રમ' નું ઉદ્ઘાટન ગુજરાત રાજ્યના માન.મુખ્યમંત્રીશ્રી વિજયભાઈ રૂપાણીના હસ્તે થનાર છે. સદરહુ કાર્યક્રમનું પ્રસારણ 'વંદે ગુજરાત' ચેનલ દ્વારા તા. ૨૫-૬-૧૮ના રોજ સવારે ૧૦-૦૦ થી ૧-૦૦ દરમિયાન થનાર છે, તો આ કાર્યક્રમ શાળાના વિદ્યાર્થીઓ, શિક્ષકો અને વાલીઓએ અચૂક નિહાળે તેવી શાળામાં વ્યવસ્થા કરશો.

તા. ૨૨-૬-૧૮

ડૉ. એલ.ડી.દેસાઈ  
શાસનાધિકારી

**Central Recordkeeping Agency (CRA) – NSDL e-Governance Infrastructure Limited**

**Affix  
recent colour  
photograph of  
3.5 cm x 2.5 cm size /  
Passport size**

Please select your category [ Please tick(✓) ]	Central Govt. <input type="checkbox"/>	State Govt. <input type="checkbox"/>	NPS Lite (GDS) <input type="checkbox"/>
	All Citizen Model <input type="checkbox"/>	Corporate Sector <input type="checkbox"/>	

\* indicates mandatory fields. Please fill the form in English and BLOCK letters with black ink pen. (Refer general guidelines at instructions page)  
KYC Number, Retirement Adviser Code and Spouse Name fields are not applicable for Government & NPS Lite Subscribers

[illegible]

Name of Applicant in full      Shri ☐      Smt. ☐      Kumari ☐

First Name*																				
Middle Name																				
Last Name																				
Subscriber's Maiden Name (if any)																				
Father's Name*																				
(Refer Sr. No. 1 of instructions)																				
Mother's Name*																				
(Refer Sr. No. 1 of instructions)																				
Father's name will be printed on PRAN card. In case, mother's name to be printed instead of father's name [ Please tick (✓) ] <input type="checkbox"/>																				
Date of Birth*											(Date of Birth should be supported by relevant documentary proof)									
City of Birth*																				
Country of Birth*																				
Gender* [ Please tick (✓) ]																				
Marital Status*																				
Spouse Name*																				
(Refer Sr. No. 1 of instructions)																				
Residential Status*																				

[illegible][illegible]

☐ I hereby authorize CRA registered with Pension Fund Regulatory and Development Authority (PFRDA) to use my Aadhaar details for National Pension System (NPS) and authenticate my identity through the Aadhaar Authentication system (Aadhaar based e-KYC services of UIDAI) in accordance with the provisions of the Aadhaar (Targeted Delivery of Financial and other Subsidies, Benefits and Services) Act, 2016 and the allied rules and regulations notified thereunder. I understand that the Aadhaar details (physical and / or digital, as the case maybe) submitted for availing services under NPS will be maintained in NPS till the time the account is not inactive in NPS or the timeframe decided by PFRDA, the regulator of NPS, whichever is later. I understand that Security and confidentiality of personal identity data provided, for the purpose of Aadhaar based authentication is ensured by CRA registered with PFRDA till such time it is acting as CRA for my NPS account.

*As per the amendments made under Prevention of Money-Laundering (Maintenance of Records) Second Amendment Rules, 2017 Aadhaar and PAN are mandatory under NPS. If you do not have Aadhaar and / or PAN at present, please ensure that these details are provided within six months of submission of this Subscriber Registration Form.*

### Correspondence Address

[ Please tick (✓), as applicable ]	Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others	Passport /Driving License/UID (Aadhaar)/Voter ID card/NREGA Job Card/Ration Card/Others
#Not more than 3 months old. Please refer Sr. No. 2 of the instructions	Registered Lease/Sale agreement of residence	Registered Lease/Sale agreement of residence
	#Latest Gas/Electricity/Telephone[Landline] Bill	#Latest Gas/Electricity/Telephone[Landline] Bill

Address Type\* Residential/Business ☐ Residential ☐ Business ☐ Registered Office ☐ Unspecified ☐

[illegible]☐ Tick (✓) in the box in case the address is same as above.

Address Type*	Residential/Business		Residential		Business		Registered Office		Unspecified					
Flat/Room/Door/Block no.	Landmark													
Premises/Building/Village														
Road/Street/Lane														
Area/Locality/Taluk														
City/Town/District											PIN Code			
State/U.T.											C o u n t r y			





**13. DECLARATION BY EMPLOYER****Applicable to Government Subscribers only****(Subscribers Employment Details to be filled and attested by the Deptt. (All Details are Mandatory))**

Date of Joining	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>	Date of Retirement	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Employee Code/ID (If applicable)	<input type="text"/>		
PPAN (If applicable)	<input type="text"/>		
Group of Employee (Tick as applicable)	Group A <input type="checkbox"/>	Group B <input type="checkbox"/>	Group C <input type="checkbox"/> Group D <input type="checkbox"/>
Office	<input type="text"/>		
Department	<input type="text"/>		
Ministry	<input type="text"/>		
DDO Registration Number	<input type="text"/>		
DTO/PAO/CDDO/DTA/PrAO Registration Number	<input type="text"/>		
Basic Pay	<input type="text"/>		
Pay Scale	<input type="text"/>		

Employee Code/ID and PPAN are optional. If you intend to provide, mention any one.

It is certified that the details provided in this subscriber registration form by \_\_\_\_\_ employed with us, including the address and employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he/she has read entries/entries have been read over to him/her by us and got confirmed by him/her.

Signature of the Authorised person (In the box above)	Rubber Stamp of the DDO (In the box above)	Signature of the Authorised person (In the box above)	Rubber Stamp of the DTO/PAO/CDDO/ DTA/PrAO (In the box above)
Designation of the Authorised Person	<input type="text"/>	Designation of the Authorised Person	<input type="text"/>
Name of the DDO	<input type="text"/>	Name of DTO/PAO/CDDO/DTA/PrAO	<input type="text"/>
Deptt/Ministry	<input type="text"/>	Date	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

**14. DECLARATION BY EMPLOYER/ CORPORATE****Applicable to Corporate Subscribers only****(Subscribers Employment Details to be filled and attested by Corporate (All Details are Mandatory))**

Date of Joining	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>	Date of Retirement	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>
Employee Code/ID	<input type="text"/>		
Corporate Regd. Number (CHO No.) Allotted by CRA	<input type="text"/>		
CBO No. allotted by CRA	<input type="text"/>		

Certified that the details provided in this subscriber registration form by \_\_\_\_\_ employed with us, including the employment details provided above are as per the service record of the employee maintained by us. Also, it is further certified that he / she has read the entries / entries have been read over to him / her by us and got confirmed by him / her.

Date	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>	Place	<input type="text"/>
<div>Signature of the Authorised person (In the box above)</div>		<div>Rubber Stamp of the Corporate (In the box above)</div>	
Designation of the Authorised Person		<input type="text"/>	

**15. DECLARATION BY THE AGGREGATOR****Applicable to NPS Lite Subscribers****Authorisation by Aggregator's office (NL - AO)**

Certified that the subscriber is registered with the aggregator and he/she has opted to join NPS. I hereby declare that the subscriber is eligible to join NPS and the above declaration has been signed /thumb impressed before me by .....after (s)he has read the entries/ entries have been read over to her/him by me.

<div>Signature of the Authorised person (In the box above)</div>		<div>Rubber Stamp of the Aggregator (In the box above)</div>	
Name of the Aggregator		<input type="text"/>	
NPS Lite Account Office (NL-AO) Registration Number	<input type="text"/>	NPS Lite - Collection Centre (NL - CC) Registration Number	<input type="text"/>
Membership No. allotted by Aggregator (if any)	<input type="text"/>		
Place	<input type="text"/>	Date	<input type="text" value="d"/> <input type="text" value="d"/> / <input type="text" value="m"/> <input type="text" value="m"/> / <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/> <input type="text" value="y"/>

## 16. TO BE FILLED BY POP-SP

Receipt No. (17 digits)	<input type="text"/>	POP-SP Registration Number	<input type="text"/>
Document accepted for date of Birth Proof:	<input type="text"/>		
Copy of PAN card submitted	YES <input type="checkbox"/> NO <input type="checkbox"/>	KYC Compliance	YES <input type="checkbox"/> NO <input type="checkbox"/>
Documents Received:	<input type="text"/> (Originals Verified) Self Certified	<input type="text"/> (Attested) True Copies	
Identity Verification :	<input type="text"/> Done <input type="text"/>		

**Existing Bank Customer:**

I/we hereby certify/confirm that Shri/Smt/Kum .....is an existing customer of the Bank having fully operative Saving Bank account no.....at.....branch and KYC norms required for opening Bank Account which match the requirements for opening NPS account have been fully complied with. We further confirm that the S. B. a/c of Sh/Smt/Kum .....is not a 'Basic Savings Bank Deposit Account'

**Adhaar Based KYC Certificate:**

I/we hereby certify that Aadhaar Number .....of Sh/Smt/Kum.....has been checked and the name and address mentioned on the original Aadhaar card are matching with that mentioned on NPS application form.

To be filled by POP-SP		Name:											
		Designation:					Place:						
POP-SP Seal	Signature of Authorized Signatory	Date		d	d	/	m	m	/	y	y	y	y

**[To be filled by CRA - Facilitation Centre (CRA-FC)]**

[illegible]

## ACKNOWLEDGEMENT

Name of the Subscriber:

Contribution Amount Remitted: ₹

Date of Receipt of Application and Contribution Amount:

Stamp and Signature of the Employer/PoP:

## INSTRUCTIONS FOR FILLING THE SUBSCRIBER REGISTRATION FORM

### General Guidelines

- (a) Please fill the form in legible handwriting so as to avoid errors in your application processing. Please do not overwrite. Corrections should be made by cancelling and re-writing and such corrections should be countersigned by the applicant. Each box, wherever provided, should contain only one character (alphabet / number / punctuation mark) leaving a blank box after each word.
- (b) In case, you mention the KYC number submission of proof for the same is necessary.
- (c) Applications incomplete in any respect and/or not accompanied by required documents are liable to be rejected. The application is liable to be rejected if mandatory fields are left blank or the application form is printed back to back.
- (d) The subscriber should not sign across the photograph. The photograph should not be stapled or clipped to the form. If there is any mark on the photograph such that it hinders the clear visibility of the face of the subscriber, the application shall not be accepted.
- (e) Copies of all the documents submitted by the applicant should be self-attested and accompanied by originals for verification by the nodal office.
- (f) Name and Address of the applicant mentioned on the form, should match with the documentary proof submitted.
- (g) The subscriber's thumb's impression should be verified by the designated officer of POP-SP / Nodal Office.

S. No	Item No.	Item Details	Instructions			
1	1	Personal Details	i. This Form is applicable to Resident Indians and there is a separate Form for Non Resident Indians. ii. Currently, Foreign Nationals / Other Country Individuals (OCI) and Persons of Indian Origin (PIO) are not allowed to open PRAN. iii. The applicant shall mention father's name and mother's name and shall select the option to be printed on PRAN Card.			
		Spouse Name	If married, spouse name is mandatory.			
		Father's Name	i. Father's name is mandatory. ii. If father's name has more than 30 digits, you may fill Annexure II for the same.			
		Mother's Name	i. Mother's name is mandatory ii. If Mother's name has more than 30 digits, you may fill Annexure II for the same.			
		Date of Birth	Please ensure that the date of birth matches as indicated in the document provided in the support.			
2	2, 3 & 4	Identity, Correspondence & Permanent address details	S.No	Proof of Identity (Copy of any one)	S.No	Proof of Address (Copy of any one)
			1	Passport issued by Government of India.	1	Passport issued by Government of India
			2	Ration card with photograph.	2	Ration card with photograph and residential address
			3	Bank Pass book or certificate with Photograph.	3	Bank Pass book or certificate with photograph and residential address
			4	Certificate of the POP bank for an existing Bank customer.	4	Certificate of the POP bank for an existing Bank customer.
			5	Voters Identity card with photograph and residential address.	5	Voters Identity card with photograph and residential address
			6	Valid Driving license with photograph	6	Valid Driving license with photograph and residential address
			7	Certificate of identity with photograph signed by a Member of Parliament or Member of Legislative Assembly	7	Letter from any recognized public authority at the level of Gazetted officer like District Magistrate, Divisional commissioner, BDO, Tehsildar, Mandal Revenue Officer, Judicial Magistrate etc.
			8	PAN Card issued by Income tax department	8	Certificate of address with photograph signed by a Member of Parliament or Member of Legislative Assembly
			9	Aadhar Card / letter issued by Unique Identification Authority of India	9	Aadhar Card / letter issued by Unique Identification Authority of India clearly showing the address
			10	Job cards issued by NREGA duly signed by an officer of the State Government	10	Job cards issued by NREGA duly signed by an officer of the State Government
			11	Identity card issued by Central/State government and its Departments, statutory/ Regulatory Authorities, Public Sector Undertakings, Scheduled commercial Banks, Public Financial Institutions, Colleges affiliated to universities and Professional Bodies such as ICAI, ICWAI, ICSI, Bar Council etc.	11	The identity card/document with address, issued by any of the following: Central/State Government and its Departments, Statuary/Regulatory Authorities, Public Sector Undertakings, Scheduled Commercial Banks, Public Financial Institutions for their employees.
			12	Photo. Identity Card issued by Defence, Paramilitary and Police department's	12	Latest Electricity/water bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)
			13	Ex-Service Man Card issued by Ministry of Defence to their employees.	13	Latest Telephone bill in the name of the Subscriber / Claimant and showing the address (less than 3 months old)
		14	Photo Credit card.	14	Latest Property/house Tax receipt (not more than one year old)	
				15	Existing valid registered lease agreement of the house on stamp paper ( in case of rented/leased accommodation)	
			Note: (i) If the address on the document submitted for identity proof by the prospective customer is same as that declared by him/her in the account opening form, the document may be accepted as a valid proof of both identity and address. (ii) If the address indicated on the document submitted for identity proof differs from the current address mentioned in the account opening form, a separate proof of address should be obtained. All future communications will be sent to correspondence address. If correspondence & Permanent address are different, then proof for both have to be submitted. (iii) The KYC documents may be submitted within a period of 30 days after generation of PRAN. (Only for Government Subscribers)			
		3	6	Politically Exposed Person	Politically Exposed Persons' (PEPs) are individuals who are or have been entrusted with prominent public functions in a foreign country, for example heads of state or of the government, senior politicians, senior government, judicial or military officials, senior executives of state-owned corporations, important political party officials.	
		4	7	Subscriber's Bank Details	For Tier I & Tier II, bank details are mandatory and it should be supported by cancelled cheque. Please attach a Cancelled cheque (containing Subscriber Name, Bank Account Number and IFS Code) or Bank Certificate containing Name, Bank Account Number and IFS code, for direct credit or electronic transfer. In case if the cheque is not preprinted with name, additionally, a copy of the bank passbook or bank certificate containing Name, Bank Account Number and IFS code should be submitted.	
5	8	Subscriber's Nomination Details	In case of more than one nominee, percentage share value for all the nominees must be integer. Decimals/Fractional values shall not be accepted in the nomination(s). Sum of percentage share across all the nominees must be equal to 100. If sum of percentage is not equal to 100, entire nomination will be rejected.			
6	10	Pension Fund (PF) Selection and Investment Option	For more details on 'Investment Option', you may visit CRA website. Subscribers from Government sector are currently not allowed to exercise the investment option. As mentioned, your contribution will be invested by default PFs as per the guidelines issued by the Government.			
7	11	Declaration by Subscriber	Signature / Thumb impression should only be within the box provided in the form. Thumb impression, if used, should be attested by the designated officer of POP/POP-SP/Nodal office with the official seal and stamp. Left Thumb Impression in case of males and Right Thumb Impression in case of females.			
8	12	Declaration by subscriber on FATCA Compliance	Clarification / Guidelines on filling details if applicant residence for tax purposes in jurisdiction(s) outside India			
			<ul style="list-style-type: none"><li>Jurisdiction(s) of Tax Residence: Since US taxes the global income of its citizen, every US citizen of whatever nationality, is also a resident for tax purpose in USA.</li><li>Tax identification Number (TIN): TIN need not be reported if it has not been issued by the jurisdiction. However, if the said jurisdiction has issued a high integrity number with an equivalent level of identification (a "Functional equivalent"), the same may be reported. Examples of that type of number for individual include, a social security/insurance number, citizen/personal identification/services code/number and resident registration number)</li><li>If applicant residence for tax purpose in jurisdiction(s) within India, Permanent Account Number (PAN) to be provided as Tax Identification Number (TIN)</li><li>In case applicant is declaring US person status as 'No' but his/her Country of Birth is US, document evidencing Relinquishment of Citizenship should be provided or reasons for not having relinquishment certificate is to be provided</li></ul>			

### General Information for Subscribers

- a) The Subscriber can obtain the status of his/her application from CRA and their designated nodal officer.
- b) Subscribers are advised to retain the acknowledgement slip signed/ stamped by the designated nodal officer where they submit the application.
- c) For more information / clarifications, contact CRA:

Website: <https://www.npsra.nsdl.co.in>  
 Call: 022-4090 4242  
 Address: Central Recordkeeping Agency (CRA)  
 NSDL e-Governance Infrastructure Limited  
 1st Floor, Times Tower, Kamala Mills Compound, Senapati Bapat Marg,  
 Lower Parel (W), Mumbai - 400013



June 21, 2018

Anuradha Mall, IAS  
Principal Secretary (R&R) &  
Chief Executive Officer

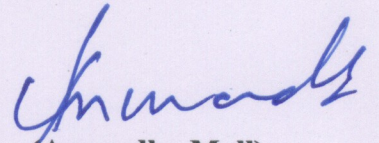
Gujarat State Disaster Management Authority  
Block No.11/12, 5th Floor, Udyog Bhavan,  
Gandhinagar  
Tel: +91 79 2325 9276/ Fax: +91 79 2325 9275

Gujarat School Safety Programme- is one of the *flagship* programmes of GSDMA aimed at inculcating a culture of safety in school children. Gujarat State Disaster Management Authority (GSDMA) organizes School Safety Week to prepare, educate and build a culture of Risk mitigation among school children in Gujarat. School Safety week is aimed at increasing awareness regarding practices for management of disasters. During this week awareness generation for school disaster management plan, do's and don'ts for hazards (earthquake, cyclones, floods, fire), identification of non-structural hazards, techniques of search & rescue and first-aid & fire-fighting will be conducted in the schools through group activities like games, lectures, competitions and mock drills.

For 2018, it is proposed to implement Gujarat School Safety Program in **44,323 schools** (Primary: 32845 & Secondary-Higher Secondary: 11478). The Gujarat School Safety program-2018 will be organized from 25<sup>th</sup> June -29<sup>th</sup> June 2018 in 44,323 schools of Gujarat.

**Hon. Minister, Disaster Management** has already given consent to inaugurate Gujarat School Safety Program-2018 through BISAG on 25<sup>th</sup> June 2018. This program has to be broadcast in all the 44,323 schools where the facility of SATCOM is available

In this regard, kindly book slot on **25<sup>th</sup> June 2018 from 10.00 hrs to 13.00 hrs** at SATCOM transmission studio (Vande Gujarat) for broadcast of inauguration function of Gujarat School Safety Week-2018.

  
(Anuradha Mall)

**Shri T P Singh**  
Director- BISAG  
Near CH 'O' Circle,  
Indulal Yagnik Marg,  
Gandhinagar-Ahmedabad Highway, Gandhinagar

Copy to:

- Collector & District Magistrate (All District).....(for necessary action please)



# AHMEDABAD MUNICIPAL CORPORATION FIRE & EMERGENCY SERVICE

DANAPITH FIRE STATION, ( H. O. AHMEDABAD - 380 001  
PH. : (079) 22148466 / 67 / 68, 32981178, 32981500 FAX : (079) 33140890.

ફાયર એન્ડ ઇમરજન્સી સર્વિસ  
તા-21/06/2018

પતિ,  
અધિકારીશ્રી  
સાલ સેલ સાર  
કુ-સચ્ચ પી.ડી.પી.યુ નીલાજી મા  
કેસા સેલ સંધીનગર

**વિષય :-** શાળા સલામતી સપ્તાહ ૨૦૧૮ અન્વયે નિદર્શન આયોજન બાબત...

**સંદર્ભ:-** મુખ્ય કારોબારી અધિકારીશ્રી, જીએસડીએમએ પત્રનંબર

GSDMA Letter no GSDMA/SM/School/IV/training of master trainers/1441198 Date 18/6/18

ઉપરોક્ત વિષયે પત્ર અન્વયે જણાવવાનું કે, જી.એસ.ડી.એમ.એ.- ગાંધીનગર ખાસ ગુજરાત રાજ્યની તમામ સરકારી પ્રાથમિક શાળામાં "શાળા સલામતી સપ્તાહ ૨૦૧૮" ની ઉજવણી કરવાનું નકિક કરેલ છે.

રાજ્ય સરકારશ્રી પુર્વતેધારી અને સજ્જતાના અભીગમને ધ્યાને રાખતા બાળકોમાં શાળા સ્તરે વિવિધ આપતિઓ દરમ્યાન શું કરવું, અને શું ના કરવું તે અંગેની સમજ કેળવાય તેવા પ્રયાસો થી "ગુજરાત શાળા સલામતી કાર્યક્રમ" અમલીકરણ કરવામાં આવેલ છે. જે પરત્વે તારીખ ૨૫/૬/૨૦૧૮ ના રોજ માન. મુખ્યમંત્રીશ્રી, ગુજરાત ખાસ ગાંધીનગર મળેથી ઉપસાદન કરવાનું છે.

આપની કક્ષાએ થી ૧૦૮ ગાડી ના લોકેશન થી જે નજીકની સરકારી પ્રાથમિક શાળામાં તારીખ ૨૫/૬/૨૦૧૮ના તારીખથી ૨૬/૬/૨૦૧૮ ના પાંચ દિવસ દરમ્યાન દૈનિક બે કે તેથી વધારે શાળામાં શુક્રમ અંગેની પ્રાથમિક જનકારી આપતુ નિદર્શન યોજવા છે. તે નિદર્શન કઈ તારીખ, શાળામાં કરવામાં આવેલ, શાળાના વિદ્યાર્થીની સંખ્યા અને ફોટોગ્રાફ, સાથે નો એકવાલ અને ની કચેરીમાં તારીખ ૧૦/૭/૨૦૧૮ સુધી પહોંચતો કરવાનો રહેશે. તે માટે તમામ વ્યવસ્થા આપની કક્ષાએથી યોગ્ય પદ્ધતી કાર્યવાહી કરી આપવી.


*Mesha*  
પ્રોજેક્ટ ઓફિસર

*[Signature]*  
ચીફ ફાયર ઓફિસર

**નકલ સહ વિનય રવાના :-**

- ૧) મુખ્ય કારોબારી અધિકારીશ્રી,  
જી.એસ.ડી.એમ.એ., બ્લોક નં. ૧૧, પાંચમો માળ, ઉધોગભવન, સેક્ટર-૧૧, ગાંધીનગર
- ૨) પ્રાથમિક શિક્ષણાધિકારીશ્રી અમદાવાદ..... જાણ તથા પદ્ધતિ કાર્યવાહી થવા સારું

Gujarat State Disaster Management Authority  
Block No.11/12, 5th Floor, Udyog Bhavan,  
Gandhinagar  
Tel: +91 79 2325 9276/ Fax: +91 79 2325 9275

  
Anuradha Mall, IAS  
Principal Secretary (R&R) &  
Chief Executive Officer

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Since 2015, NDRF has been an integral stakeholder of School Safety Program and provided support in creating awareness among school children and teachers about Search & Rescue techniques through demonstrations and mockdrills.

In this regard, kindly extend your support by conducting demonstration programs on Search & Rescue techniques and mockdrills in various schools in coordination with District Administration during Gujarat School Safety program 2018. A plan of action in this regard may be submitted to this office.

  
(Anuradha Mall)

Shri Sanjay Kumar, IPS  
Director General, NDRF  
Sector-1 R K Puram,  
New Delhi -66

Copy to:

- Shri R Joon, Commandant, 6<sup>th</sup> Bn NDRF, Chiloda Road, Gandhinagar, 382042
- Collector & District Magistrate (All District)

**Tentative schedule of the Gujarat School Safety Week-2018**

<b>Date</b>	<b>Activities</b>
June 25, 2018 (Monday)	<ul style="list-style-type: none"> <li>• Inauguration by Hon. Minister, DM</li> </ul>
	<ul style="list-style-type: none"> <li>• Orientation Program – Introduction to Disaster, Hazards and Vulnerability</li> </ul>
	<ul style="list-style-type: none"> <li>• Session of School Disaster Management Plan</li> </ul>
June 26, 2018 (Tuesday)	<ul style="list-style-type: none"> <li>• Building awareness about Flood and Cyclone and the Response to these Disasters theme with the help of IEC materials, Audio/Video, Posters and Games</li> <li>• Orientation on Non-Structural Risks in the Schools</li> </ul>
June 27, 2018 (Wednesday)	<ul style="list-style-type: none"> <li>• Session on Fire, Earthquake and Road Accidents</li> <li>• Disaster Awareness Film Screening</li> </ul>
June 28, 2018 (Thursday)	<ul style="list-style-type: none"> <li>• Orientation on Search and Rescue and First Aid</li> <li>• Slogan Competition and Debate Competition</li> <li>• Project Competition from School Children</li> </ul>
June 29, 2018 (Friday)	<ul style="list-style-type: none"> <li>• Shakeout Drill and Mock Exercises (Mock Drills)</li> <li>• Prize Distribution</li> </ul>