Office of the Principal, Govt. College for Women, Hisar

Office Order

Memo No: 338

Date:

Mentor-Mentee Meeting

Date: 29-11-2024

Agenda: To create APPAR/ABC-ID for BA/BCOM/BSc (NM, CS, Med)/BA-Geog(H) 1st Year Students

All mentors are hereby directed to inform and assist the Ist Year students in creating their APAAR/ABC-ID accounts as per NEP-2020 requirements.

The following documents are required for this purpose:

- 1. Mobile Phone linked with the student's Aadhaar number.
- 2. Self Aadhaar Card Copy of the student.
- 3. In case of a Minor Student, (under 18 years of age as on 30.11.2024): submit
- A Consent Form signed by their parents, to be submitted to the mentor.
- · A copy of the Parent's Aadhaar Card.

Additionally, all students are instructed to download the **DigiLocker app** from the Play Store.

APAAR/ABC-ID can be generated from any of the following Plateform:

- 1. DigiLocker
- 2. ABC Portal

Mentors whose duty has been assigned are directed to guide the students promptly and ensure compliance with these instructions. Students detail like College Roll No, University Roll No/registration No etc has already been shared with you in college whatsapp group. The complete detail of every student with APAAR IDs, both in Soft Copy (in Excel Sheet) and Hard Copy must be submitted to Mr. Yogesh, dealing university work upto 04.12.2024 positively.

This is the responsibility of the mentors, and the task is time-bound. Top priority must be given to this assignment. In case of any discrepancy or negligence, the concerned mentor(s) will be held personally responsible.

Principal 11 2021

University Works

Duty of mentors for generation of APAAR/ABC-ID

Sr. No.	College / University Roll No.	Class/Room No.	Mentor's Name	Signature
1	1240177001-69	B.COM.I/302	Ms. Anita Taneja Mr. Gagan Bansal	
2	12401770070 ONWARD	B.COM.I/306	Ms. Shaina Tehria Ms. Kirti Verma	
3	1243010002-ONWARDS	B.SC.I N-MED/207	Mr. Virender Singh Dr. Kiran Bishnoi	
4	12430110031-41	B.SC .I.MED/206	Ms. Monika Ms. Annu Goyal	
5	1243010001 onwards	B.SC I.C-SCI/301	Mr. Vipin Babbar	
6	1240170001-55	B.A.I/102	Ms. Bimla Devi Mr. Anil Budania	
7	1240170056-108	B.A.I /103	Ms. Manju Lata Dr. Kavita (Physics)	
8	1240170109-160	B.A.I/107	Ms. Suman Lata Dr. Renu Sodhi	
9	1240170161-220	B.A.I /116	Mr. Ramesh Mr. Satish Pannu	
10	1240170221-273	B.A.I/108	Ms. Shalu Mohan Dr. Suman Bansal	
11	1240170274-324	B.A.I /109	Ms. Parveen Kumari Ms. Sonal	
12	1240170325-363	B.A.I/111	Dr. Randhir Singh (on exam Duty) Dr. Renu sheoran Dr. Priyanka (Chemistry)	
13	1240170364 onwards	B.A.I/208	Dr. V S Beniwal (on exam Duty) Sh. Sushil Dr. Kamlesh	
14	1240142001-23	BA.I. GEOG. HONS/316	Ms. Mamta	

Principal GCW-Hisar

Incharge University Works

Date: 29-11-2024

OF STUDENT FOR APAAR ID GENERATION

Name of College: Government College for Women-Hisar
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I,
the sole purpose of creation of APAAR ID and opening of Digital accounts and purposes.
I understand that my APAAR ID may be used and shared for limited purposes as may be notified by Ministry of Education from time-to-time for educational and related activities. Further I am also aware that my personal identifiable information (Name Address, Age, Date of Birth, Gender and Photograph) may be made available to entities engaged in various educational activities such as UDISE+ database scholarships, maintenance academic records, other stakeholders like Educational Institutions and recruitment agencies.
I authorise Ministry of Education to use my Aadhaar number for performing Aadhaar based authentication with UIDAI as per provision of the Aadhaar (Targeted Delivery of Financial and Other Subsidies, Benefits, and Services) Act, 2016 for the aforesaid purpose. I understand that UIDAI will share my e-KYC details, or response of "Yes" with Ministry of Education upon successful authentication.
I understand that the information shared by me shall be kept Confidential and shall not be divulged to any third party except as may be required by law.
I understand that I can withdraw my consent forall or any of the purposes at any time by and on withdrawal of my consent, the processing of my shared information will stop, however, any personal data already been processed shall remain unaffected on such withdrawal of consent.
Date of Physical Consent: <date></date>
Place of Physical Consent: <place> (Signature)</place>
(For College Use)
I,
Date(Signature)