NSS ACTIVITIES-MONTHLY REPORT SUBMISSION FORM FOR FORWARDING TO NSSRC

All Program Officers must update their NSS Activities on Monthly Basis. The same report will be sent to the NSSRC, Ministry of Youth Affairs and Sport, GOI

studentswelfare@tecnia.in Switch account

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* Required

Email *

studentswelfare@tecnia.in

Name of the State /UT *

DELHI

Status of NSS Units / Volunteers: *

Self Financing Unit/s-SFUs Unit

No. of Institution covered under NSS *

1

1

Total no. of NSS units (on the date of report) *

Total no. of Male Volunteer (on the date of report) *

88

Total no. of Male Volunteer enrolled (During the Month) *

50

Total no. of Female Volunteer (on the date of report) *

68

Total no. of Female Volunteer enrolled (During the Month) *

40

Total no. of Both Male & Female Volunteer enrolled (During the Month) *

90

Total no. of Both Male & Female Volunteer (on the date of report) *

156

No. of villages/slum Adopted (During the Month) *

0

No. of villages/slum Adopted (on the date of report) *

1

No. of Special camps Organized (During the Month) *

0

No. of Special camps Organized (on the date of report) *

0

Name of the place where camps were organized and details in a paragraph *

NA

Total no. of Programme officer *

1

No. of Programme officer trained through Empanelled Training Is *

0

Activity done during the month *	
No activities	
✓ Plantation Drive-	
Blood Donation	
Pulse Polio Immunization	
Participation in health/eye/ Thalassemia/ Immunization Camps etc	
Awareness Programmes/ Rallies/ campaigns	
Self – Defence training	

:

Activity done (During the month) *										
	NIL	1	2	3	5	10-50	50-100	100- 200	Mo tha 20	
No activities	0	0	0	۲	0	0	0	0	С	
No. of Saplings Planted	0	0	0	0	0	۲	0	0	С	
No. of Blood Donation camps	۲	0	0	0	0	0	0	0	С	
No. of units of blood donated	۲	0	0	0	0	0	0	0	С	
No. of Volunteers Participated in Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С	
No. of children benefitted through Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С	
No. of camps for Participation in health/eye/ Thalassemia/ Immunization Camps	۲	0	0	0	0	0	0	0	С	
No. of Volunteers Participated Participation in health/eye/ Thalassemia/	۲	0	0	0	0	0	0	0	С	

) PM	NSS A	CTIVITIES-	MONTHLY	REPORT S	UBMISSIO	N FORM FC	R FORWAR	RDING TO I	NSSRC
Immunization Camps									
No. of Programmes conducted for Awareness Programmes/ Rallies/ campaigns	0	۲	0	0	0	0	0	0	C
No. of Volunteers conducted for Awareness Programmes/ Rallies/ campaigns	0	0	0	0	0	0	۲	0	C
No. of Programmes conducted for Saramdan	۲	0	0	0	0	0	0	0	С
No. of Volunteers participated in Saramdan	۲	0	0	0	0	0	0	0	C
No. of Volunteers trained under Self-Defence training	۲	0	0	0	0	0	0	0	C
•									r

Activities done Progressive Total *											
	NIL	1	2	3	4	5-10	10-20	50	10		
No activities	0	0	0	0	0	0	۲	0	С		
No. of Saplings Planted	0	0	0	0	0	0	0	۲	C		
No. of Blood Donation camps	۲	0	0	0	0	0	0	0	C		
No. of units of blood donated	۲	0	0	0	0	0	0	0	C		
No. of Volunteers Participated in Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С		
No. of children benefitted through Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С		
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No. of Volunteers Participated in health/eye/ Thalassemia/	۲	0	0	0	0	0	0	0	C		

0 PM	NSS A	CTIVITIES	MONTHLY	REPORT S	UBMISSION	N FORM FO	R FORWAF	RDING TO P	ISSRC
Immunization Camps									
No. of Programmes conducted for Awareness Programmes/ Rallies/ campaigns	0	۲	0	0	0	0	0	0	C
No. of Volunteers conducted for Awareness Programmes/ Rallies/ campaigns	0	۲	0	0	0	0	0	0	C
No. of Programmes conducted for Saramdan	۲	0	0	0	0	0	0	0	С
No. of Volunteers participated in Saramdan	۲	0	0	0	0	0	0	0	С
No. of Volunteers trained under Self-Defence training	۲	0	0	0	0	0	0	0	C
•									۲

2.4 Other significant Achievement of the Month (Must): *

Your answer

Name of Program Officer and College Name *

Ms Vaishali Prasad, Tecnia Institute of Advanc

Mobile No. *

9717954689

Email ID *

studentswelfare@tecnia.in

List of NSS activities done during the month *

5

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No. of Institution covered under NSS *

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No. of villages/slum Adopted (on the date of report) *

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No. of Special camps Organized (During the Month) *

0

No. of Special camps Organized (on the date of report) *

0

Name of the place where camps were organized and details in a paragraph *

NA

Total no. of Programme officer *

Ms VAISHALI PRASAD, TECNIA INSTITUTE OF

No. of Programme officer trained through Empanelled Training Is *

0

Activity done during the month *
Vo activities
Plantation Drive-
Blood Donation
Pulse Polio Immunization
Participation in health/eye/ Thalassemia/ Immunization Camps etc
Awareness Programmes/ Rallies/ campaigns
Self – Defence training

:

Activity done (During the month) *										
	NIL	1	2	3	5	10-50	50-100	100- 200	Mo tha 20	
No activities	0	۲	0	0	0	0	0	0	С	
No. of Saplings Planted	۲	0	0	0	0	0	0	0	С	
No. of Blood Donation camps	۲	0	0	0	0	0	0	0	С	
No. of units of blood donated	۲	0	0	0	0	0	0	0	С	
No. of Volunteers Participated in Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С	
No. of children benefitted through Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С	
No. of camps for Participation in health/eye/ Thalassemia/ Immunization Camps	۲	0	0	0	0	0	0	0	С	
No. of Volunteers Participated Participation in health/eye/ Thalassemia/	۲	0	0	0	0	0	0	0	С	

3 PM	PM NSS ACTIVITIES-MONTHLY REPORT SUBMISSION FORM FOR FORWARDING TO NSSRC								
Immunization Camps									
No. of Programmes conducted for Awareness Programmes/ Rallies/ campaigns	۲	0	0	0	0	0	0	0	C
No. of Volunteers conducted for Awareness Programmes/ Rallies/ campaigns	۲	0	0	0	0	0	0	0	C
No. of Programmes conducted for Saramdan	۲	0	0	0	0	0	0	0	С
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No. of Volunteers trained under Self-Defence training	۲	0	0	0	0	0	0	0	C
•									۲

Activities done Progressive Total *											
	NIL	1	2	3	4	5-10	10-20	50	10		
No activities	0	0	0	0	0	0	۲	0	С		
No. of Saplings Planted	0	0	0	0	0	0	0	۲	С		
No. of Blood Donation camps	۲	0	0	0	0	0	0	0	С		
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No. of Volunteers Participated in Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С		
No. of children benefitted through Pulse Polio Immunziation	۲	0	0	0	0	0	0	0	С		
No. of camps for Participation in health/eye/ Thalassemia/ Immunization Camps	۲	0	0	0	0	0	0	0	С		
No. of Volunteers Participated in health/eye/ Thalassemia/	۲	0	0	0	0	0	0	0	С		

3 PM NSS ACTIVITIES-MONTHLY REPORT SUBMISSION FORM FOR FORWARDING TO NSSF								NSSRC	
Immunization Camps									
No. of Programmes conducted for Awareness Programmes/ Rallies/ campaigns	۲	0	0	0	0	0	0	0	C
No. of Volunteers conducted for Awareness Programmes/ Rallies/ campaigns	۲	0	0	0	0	0	0	0	C
No. of Programmes conducted for Saramdan	۲	0	0	0	0	0	0	0	С
No. of Volunteers participated in Saramdan	۲	0	0	0	0	0	0	0	С
No. of Volunteers trained under Self-Defence training	۲	0	0	0	0	0	0	0	C
•									۲

2.4 Other significant Achievement of the Month (Must): *

we have added more volunteers to our unit

Name of Program Officer and College Name *

Ms Vaishali Prasad

Mobile No. *

9717954689

Email ID *

studentswelfare@tecnia.in

List of NSS activities done during the month *

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