



GOVT. OF N.C.T. OF DELHI.  
**MAULANA AZAD MEDICAL COLLEGE**

and Associated Lok Nayak, Govind Ballabh Pant Hospital &  
Guru Nanak Eye Centre, 2, B.S.Z. Marg, New Delhi-02  
Tel.011-23239271 Extn.215

NO.F .1A(Sports)/2007/MC(ACA)/

9760

Dated:

21-6-2016

**CORRIGENDUM**

In continuation of this office circular dated 16.06.2016 regarding reopen of Swimming Pool w.e.f. 17.06.2016 to 31.10.2016 the schedule may be read as :

Days	Timings	Remarks
Monday, Wednesday & Friday	06:00 AM to 08:00 AM	Females
	05:00 PM to 08.30 PM	Males
Tuesday, Thursday & Saturday	06:00 AM to 08:00 AM	Males
	05:00 PM to 08.30 PM	Females
Sunday	06:30 AM to 10:00 AM (Only for Faculty & their dependent family members)	Sunday evening will be closed.

Other contents of the order remains unchanged.

(R.K. TYAGI)

ADMN. OFFICER (ESTATE)

NO.F .1A/Sport/2007/MC(ACA)/

9760

Dated:

21-6-2016

Copy forwarded for information and necessary action to:-

1. All HODs, MAMC, New Delhi - 110002.
2. The HOD(Microbiology), MAMC with the request to arrange to take monthly Water Samples from Swimming Pool and submit month wise Water testing report to the undersigned for further submission to the Police Licensing Unit, Delhi.
3. The Registrar (Academic), MAMC - with the request to make necessary arrangements to issue membership Cards to the desirous UG/PG Student/ Faculty & their dependent family members, MAMC.
4. Dr. Dinesh Kumar, Prof. (Anatomy)/Officer In-charge, Swimming Pool, MAMC
5. In-charge Data Centre, MAMC- with the request to upload the same & enclosed application form for Membership of Swimming Pool on the College website.
6. Assistant Engineer (Elect.), B-2441, PWD B.P. Elect. Divn. B-244(N), LNH, New Delhi - 110002/
7. The Security In-charge, MAMC with the direction to check the attendance of Coach & Life Guards at the Swimming Pool and also make necessary arrangements to check / stop the un-authorized entrance in the Swimming Pool.
8. Sh. Aijazddin, Swimming Coach, Swimming Pool, MAMC, New Delhi.
9. All Notice Board, MAMC.
10. President/Secretary, AMA.
11. P.S. to Dean.

(R.K. TYAGI)

ADMN. OFFICER (ESTATE)

Ph. 011-23210174



Application Form for Membership of Swimming Pool, MAMC  
(to be filled in Block letters only)

Membership No. MAMC/2016/.....

For all :

Name	
Gender	
Mobile No.	
Name & Mobile No. of person to be contacted in case of emergency	

For Students :

Batch No.	
Course	

For Faculty & Dependent Family Members :

Name of Faculty	
If the application is for a dependent family member, his/her relation with the Faculty	
Designation of Faculty	
Name of Department	

(Signature of Applicant)

For Students :

Date of issue	
Valid upto	

**Note : This application form is to be submitted in Academic Section, MAMC along with following :**

1. Two photographs - One pasted on the form and One additional photo for I. Card.
2. Copy of Identity Proof/I.Card.
3. Proof of deposit of requisite fee.