To

All the Heads of Govt. Schools
Directorate of Education,
Delhi/New Delhi.

Sub:- Regarding Deputation of NSS Volunteers for Adventure Programme at ABVIMAS, Solang Manali-region.

Sir/Madam,

Please find enclosed herewith letter No F.No.P16/2/13-14/NSS/RCD/Govt. of India Ministry of Youth Affairs & Sports dated 09/12/2013 regarding Deputation of NSS Volunteers for Adventure Programme at ABVIMAS, Solang Manali-region.

You are therefore requested to nominate your school students, Maximum of No. 2(two) i.e. one boy & one girl latest by 16-12-2013 to this office.

Any further clarification may be obtained from Dr. Harjeet Kaur, ADE (Physical Education), Chhatrasal Stadium, Model Town, New Delhi. Her contact No is 9810528296.

Yours Faithfully,

(SATPAL)
Addl.DE (Sports & PE)

Copy to:-

1. All RDE’s.
2. All DDE’s.
3. All ADE’s.
4. All EO’s.
5. All SPE’s.
7. OS(IT) with the request to place the same on Website.
Dr. Harjeet Kaur  
State Liaison Officer, NSS  
Directorate of Education  
Delhi Administration,  
Chatrasal Stadium, Model Town  
New Delhi

Sub: Deputation of NSS volunteers for Adventure Programme at ABVIMAS, Solang Manali- reg.

Sir,

The Ministry of Youth Affairs & Sports Govt. of India is organizing National Adventure Programme at ABVIMAS, Solang, Manali (Himachal Pradesh) 175131 under Rajiv Gandhi Adventure Scheme for NSS Volunteers from 21st to 30th December 2013. Hence, you are requested to nominate the names of interested NSS volunteers and Programme Officer, NSS from the +2 schools of NCT of Delhi as per the table given below to participate in the said programme. The participants will be reimbursed 2nd Class (sleeper) rail fare/ordinary bus fare by shortest route from their institution to Manali and back on production of ticket. Free board & lodging facility will be provided by the organizing agency during the programme.

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Name of the +2 level Schools</th>
<th>No. of Male NSS Volunteer</th>
<th>No. of Female NSS Volunteer</th>
<th>Total</th>
<th>Programme Officer</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Directorate of Education, Delhi Administration, Delhi</td>
<td>10</td>
<td>10</td>
<td>20</td>
<td>1 (Female) &amp; 1 (Male)</td>
<td>20+2=22</td>
</tr>
</tbody>
</table>

Not more than 2 volunteers (one male & one female) should be selected from one school (i.e. 20 NSS volunteers may be selected from 10 different schools)

The contingent will report at Manali on 20th evening or 21st December, 2013 and book return reservation on 30th December, 2013.

You are requested to send the list of participants direct to the Director, Atal Bihari Vajpayee Institute of Mountaineering & Allied Sports, Manali (HP)-175131 under intimation to this office latest by 19th December, 2013 positively by fax or email failing which the allocation will be shifted to other universities/colleges. The volunteers & Contingent leaders are advised to purchase track suit, shoes and water bottles worth Rs. 1500/- each. The bill should be in the name of APA, NSS Regional Centre, Delhi. The amount will be reimbursed only after they return back from adventure programme. They should submit the original receipt along with the TA reimbursement bill to this office after getting it duly
attested from the Programme Officer and countersigned by the Head of the Institute. General information for escort & participants and application form are enclosed.

The Programme Officer, NSS/contingent leader accompanying the contingent will be paid an honorarium of Rs.2000/- for escorting the volunteers, assisting them in filling the TA form etc. A detailed report of the adventure programme alongwith photographs and newspaper clippings may be submitted alongwith TA forms. Programme Officer NSS should also submit the receipt of Rs.2000/- being paid to him as honorarium alongwith th above documents.

While selecting and deputing the NSS volunteers, the following guidelines should be followed strictly:

1. The volunteers should be physically fit and be able to undergo adventure activities and 18 Km. Trekking. (Every volunteer must bring a medical fitness certificate from a recognized Medical Officer).
2. Every volunteer must carry an Indemnity Bond and Bonafide NSS volunteer certificate.
3. Every volunteer must carry sufficient woolen garments (minimum one pullover / sweater and trekking shoes).
4. The volunteers who have already attended any National Level Programme should not be repeated.
5. The maximum No. of selected volunteers should not be more than two from one school/institution.
6. The institution who have already sent volunteers for Adventure Programme should not be repeated.

Yours faithfully,

(H.K. Sharma)
Assistant Programme Adviser

CC:
1. Joint Secretary/ Programme Adviser, NSS, Shastri Bhavan, New Delhi
2. Dy. Prog. Adviser, PA Cell (NSS) Jam Nagar House, New Delhi
3. State Liaison Officer, NSS, Dte of Education, Delhi Administration, Chatrasal Stadium, Model Town, Delhi
4. Director, Atal Bihari Vajpayee Institute of Mountaineering & Allied Sports, Manali (HP)-175131
5. Guard file
General Information for escorts & Participants

1. **Institute will provide:** Ruck Sack, Sleeping Bag, Carry Matt, Wind Proof Jacket, Tents, Technical equipment, Instructors/Guides except Personal Clothing.


3. **Physical Fitness:** No specific pre training / pre course is required except normal medical fitness and motivation. Participants should not have any major ailment history or on medication at present. Medical certificate format is enclosed.

4. **Undertaking:** School/College Principals/parents have to give undertaking for participants in the adventure camp in favor of the trainee in the prescribed format enclosed.

5. **Facilities provided:** 265 beds capacity to accommodate participants in the Hostel. The rooms are neat & clean, well furnished with attached/common bathrooms/toilets fed with uninterrupted electricity and water supply. Hygienic veg/non veg. are served in a spacious Dining Hall.

6. **How to reach WHMI, Manali**
   (i) The nearest railhead is Ambala/Chandigarh. From Ambala and Chandigarh Manali is 310/360 km respectively approx 8-10 hours journey. Approx bus fare is Rs.350/- to Rs.450.
   (ii) Manali is also accessible from Delhi (overnight bus journey) and is approx 576 km, Bus Journey takes 15-17 hours. After every half an hour, bus ply from ISBT, Kashmiri Gate, between 4.30 p.m. to 8.30 p.m. Bus fare (Ordinary) is between Rs.800/- to Rs.1100/- and Rs.1500/- for Volvo Buses. **It is advisable that the groups should come by train to Delhi and take overnight buses to Manali as maximum buses are starting from Delhi to Manali via Ambala/Chandigarh. WHMI is located on the left bank of river Beas, 3 km away from main bus stand.**

7. **To contact for further information/clarification**
   Correspondence Address:-Director, Atal Bihari Vajpayee Institute of Mountaineering & Allied Sports, Manali (HP) — 175131
   ABVIMAS: Tel:01902-253841/250337
   Fax: 01902-252137
   Cell No. 09418076556 (Sh. Mahavir Thakur, Deputy Director)
   Cell No. 09418076556 (Sh. I.D. Sharma, SMRI)
   E-Mail: dmas_manali@yahoo.com
   Mahavir55@yahoo.co.in
   Website: adventurehimalaya.org.
APPLICATION FORM
ATAL BIHARI VAJPAYEE INSTITUTE OF MOUNTAINEERING & ALLIED SPORTS,
MANALI.(H.P.)-175131

Name of the Center at which the course is to be attended ________________________________
Name and date of the course __________________________________________________________

1. Name in Block letters ______________________________________________________________
2. Father’s/Husband’s Name ____________________________________________________________
3. Occupation/Profession ______________________________________________________________
4. Permanent Address __________________________________________________________________
   Present Address ______________________________________________________________________
5. Age and date of Birth __________________________________________________________________
6. Vegetarian/Non vegetarian ____________________________________________________________
7. Academic Qualifications _____________________________________________________________
8. Shoe of Size (Indian Standards) ______________________________________________________
8. Camp Life experience for having done mountaineering, hiking, trekking, rock climbing
   and adventure courses __________________________________________________________________

I agree to abide by/adhere to the discipline of the institute during the course failing which I
am liable to expulsion. In case of accident/injury I will not hold the Institute partially or wholly
responsible. I have read the rules and regulations of the institute and have fully understood
the meaning and significance of the same. The above entries have been made by me and are
correct to the best of my knowledge and belief.

Place __________________________ Applicants signature with date __________________________

Risk Certificate

It is certified that I agree to detail my son/daughter/myself for Course at my own risk and no
compensation will be paid to me in case of accident and I will not hold the institute or its
staff wholly or partially responsible for any mishapening.

Date __________________________ Signature of Guardian/Parent/Applicant ______________________

Countersigned
Note: The risk certificate for the applicant below 18 years is to be signed by Parent/Guardian & for others by the applicant himself/herself and countersigned by the sponsoring authority.

**Medical Certificate**

<table>
<thead>
<tr>
<th>No.</th>
<th>Details</th>
</tr>
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<tbody>
<tr>
<td>1.</td>
<td>Name</td>
</tr>
<tr>
<td>2.</td>
<td>Age Weight</td>
</tr>
<tr>
<td>3.</td>
<td>Date of last vaccination (Tab, Cholera &amp; Inoculation)</td>
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<tr>
<td>4.</td>
<td>Respiration rate at Rest</td>
</tr>
<tr>
<td>5.</td>
<td>Chest Expansion</td>
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<tr>
<td>6.</td>
<td>Pulse Rate</td>
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<tr>
<td>7.</td>
<td>Blood Pressure</td>
</tr>
<tr>
<td>8.</td>
<td>Condition of Upper limb, Toes and Feet</td>
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<tr>
<td>9.</td>
<td>Urine Examination</td>
</tr>
<tr>
<td>10.</td>
<td>Eyes/Ears/Throat</td>
</tr>
<tr>
<td>11.</td>
<td>Blood Test</td>
</tr>
<tr>
<td>12.</td>
<td>Blood Group</td>
</tr>
<tr>
<td>13.</td>
<td>Applicant should not have Asthma, Epilepsy or other fits and any other major deformity, hernia and chronic disease</td>
</tr>
</tbody>
</table>

In my opinion Mr/Mrs/Miss whose signature and address is given below is fit to undergo above course.

Signature of the applicant  Signature of Medical Officer with seal

Date
Place

**Note:** The medical officer should be MBBS and give his registration number of the council.