Chandigarh College of Engineering & Technology

Sector 26, Chandigarh – 160 019 (U.T.), INDIA APPROVED BY AICTE, NEW DELHI AND AFFILIATED WITH PANJAB UNIVERSITY, CHANDIGARH (GOVERNMENT INSTITUTE UNDER CHANDIGARH ADMINISTRATION)



No. CCET/DG/SW/28/9

Dated: 22 08 22

NOTICE

Applications are invited from all the interested student (as per prescribed application format) to apply for the following positions to form Student Council for the year 2022-23 in this Institute:

I. President : 01
II. Vice President : 01
III. Secretary : 01
IV. Joint Secretary : 02
V. Treasurer : 01

VI. Executive Members : 08 (02 from each branch)

Each nominated class representative will elect student council from among participating applicants.

Schedule for the whole process is as under:

a) Last date for Application Submission : 25.08.2022 b) Date of Election : 05.09.2022 c) Notification of Student Council : 12.09.2022

Dr. Manpreet Singh

Principal,

Chd. College of Engg. & Tech., Degree Wing, Chandigarh.

Dated Chandigarh the 12th August 2022

Endst. No. CCET/DG/SW/2820 -26

Dated: 22/08/22

A copy is forwarded to the following for information & necessary action:

- 1. All the HoDs (CSE, ECE, Civil, Mech & Applied Science), CCET (Degree Wing), Chandigarh.
- 2. Dr. Rajesh Kumar, Prof. I/C-Student Welfare, CCET (Degree Wing), Chandigarh.
- 3. Dr. Dheerendra Singh, Incharge Website, CCET (Degree Wing), Chandigarh with the request to upload the same along with application form on website of this Institute.
- 4. Dr. Gulshan Goyal, President Student Council, CCET (Degree Wing), Chandigarh.
- Dr. Anil Kumar Vaghmare, Secretary Student Council, CCET (Degree Wing), Chandigarh.
- 6. PA to Principal, CCET (Degree Wing), Chandigarh.

7. Notice Board

Chd. College of Engg. & Tech. Degree Wing, Chandigarh.

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CHANDIGARH COLLEGE OF ENGINEERING AND TECHNOLOGY (DEGREE WING)
Government Institute under Chandigarh (UT) Administration | Affiliated to Panjab University, Chandigarh
Sector-26, Chandigarh. PIN-160019 | Tel. No. 0172-2750947, 2750943
Website: www.ccet.ac.in

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RANCH: SE	MESTER: BATCH:
	E-MAIL ID:
ATEGORY:	BLOOD GROUP:
ENDER:	DATE OF BIRTH:
ESIDENTIAL ADDRESS:	
ONTA CT-NUMBER	-PARENT'S CONTACT NUMBER:
HETHER HOSTELLER	YES / NO IF YES, GIVE PERMANENT ADDRESS:
	DENT COUNCIL ACTIVITIES BEFORE, KINDLY MENTION THE DETAILS:
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