



ରମାଦେବୀ ମହିଳା ବିଶ୍ୱବିଦ୍ୟାଳୟ, ବିଦ୍ୟାବିହାର, ଭୁବନେଶ୍ୱର  
Rama Devi Women's University, VidyaVihar,  
Bhubaneswar, Odisha-751022, Ph.no-0674-2542644,  
E-mail-[registrar@rdwu.ac.in](mailto:registrar@rdwu.ac.in), Website- <https://rdwu.ac.in>

No. 2696 / Dt. 2.5.24

**NOTIFICATION**

In accordance with Statute 102 of OUFS-1990, the Teachers of the affiliated colleges of the University are required to register themselves as Colleges Teachers of Rama Devi Women's University.

The Teachers of different affiliated colleges under Rama Devi Women's University are requested to apply in the prescribed format available in the University Website, duly countersigned by the Principal along with one-time non-refundable fees of Rs. 100/- (Rupees One Hundred Only) to be deposited in the Cash Counter latest by Dt. 20.05.2024.

By order of the Vice Chancellor

*Shapaba*  
Registrar 02/05/2024

Memo. No. 2697 Dt. 2.5.24

Copy forwarded to the Principals of all affiliated colleges under RDWU for information with a request to circulate the Notification among the teachers of their respective colleges and to ensure for submission of Filled-in Application form & Fees within the stipulated time period.

*Shapaba*  
Registrar 02/05/2024

Memo. No. 2698 Dt. 2.5.24

Copy forwarded to CPGC/ COE/ COF/ Director CDC/ PIC, Library/Director, IQAC/ Dy. Registrar (Estt. & Admin.)/ P.S to VC for kind information of the Vice Chancellor.

*Shapaba*  
Registrar 02/05/2024

Memo. No. 2699 Dt. 2.5.24

Copy forwarded to OIC, University Website / Cashier for information and necessary action.

The OIC University Website is requested to upload the Notification and Application Form in the University Website.

*Shapaba*  
Registrar 02/05/2024



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**Form For Enrollment of Registered PG Teachers/ College Teachers/  
Non-teaching Employees**

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- (1) Name:
- (2) Father's Name:
- (3) Permanent Address:
- (4) Present Address:
- (5) Contact No. (Mob):
- (6) E-mail ID:
- (7) Date of Birth:  
(Copy of HSC/ Aadhar to be enclosed)
- (8) Name of the P.G. Dept./ College/ Section:
- (9) Date of Joining in Service (University/ College):
- (10) Date of Superannuation:
- (11) Copy of the MR against fees deposit.

Signature :

Name :

PG Dept./ College/ Section :

Counter Signature:  
(HoD / Principal / Controlling Officer)