

झारखण्ड केन्द्रीय विश्वविद्यालय

रांची, चेरी मनातू- 835222

CENTRAL UNIVERSITY OF JHARKHAND

Ranchi, Cheri Manatu-835222

HOSTEL ACCOMMODATION FORM FOR NEW ALLOTMENT

Accommodation Type: Triple/Double/Single occupancy **Hostel Name** _____

Instructions:

- All entries are to be filled in ink/ball point pen by the candidate in English/Hindi, in case of English please use CAPITAL LETTERS
- The Application must be accompanied by 2 Photographs and self-attested copies of the following certificates.
 - Fee receipt of admission to the Course
 - Date of Birth Certificate (10th Class Certificate).
 - Self-attested mark sheet of last examination passed
 - Documents supporting reserved category status (Self-attested).
 - Permanent Residence Certificate/Domicile Certificate of the applicant from an appropriate Magistrate/Resident Commissioner/Authority.
 - fitness certificate (Govt. health Centre) which should clearly mention that the candidate is not suffering from Communicable/infectious disease, Asthma or any other disease which may require emergency critical care.
 - copy of any one of following i) Voter I Card ii) Passport iii) Aadhaar Card
- Incomplete forms will not be considered
- Furnishing incorrect information will lead to cancellation of admission to the Hostel and other disciplinary action as may deemed fit by the university
- Attach Photocopy of Anti-ragging affidavit by student and parent.

Paste a recent
photograph attested
by HOD

STUDENT PARTICULARS

NAME:

ENROLMENT No.:

PROGRAMME (WITH SUBJECT)

SESSION: 20__-20

SEMESTER:

NORMALISED SCORE OBTAINED IN ENTRANCE EXAM.:

SEX: Male / Female [Please Tick]

PERSONAL CONTACT NUMBER:

DATE OF BIRTH:

NATIONALITY:

CATEGORY: GEN [] SC [] ST [] OBC [] EWS []

WHETHER: PWD [] WARD OF EX SERVICE MAN [] KASHMIRI MIGRANT [] WARD OF DEFENSE PERSONNEL []

MARITAL STATUS: MARRIED [] UNMARRIED []

BLOOD GROUP:

EMAIL:

MEDICAL ILLNESS (IF ANY):

FATHER'S NAME:

(Mobile No.)

MOTHER'S NAME:

(Mobile No.)

COMPLETE PERMANENT ADDRESS (With PIN Code):

RES. PHONE NO:

ADDL MOBILE NO. (IF any):

PERSON TO CONTACT IN CASE OF EMERGENCY

NAME:

RELATIONSHIP:

RES. PHONE NO:

OFFICE NO: .

MOBILE NO.:

ADDRESS:

DECLARATION

I _____ son/ daughter of Shri _____ hereby declare that all the particulars given by me above are correct to the best of my knowledge and belief. I am aware of the code of conduct for students residing in halls of residence (hostels) and I shall abide by these, failing which disciplinary action may be taken against me.

(Signature of Applicant)

(Signature of Parent/ Guardian)

Contact No.:

VERIFICATION FROM DEPARTMENT

Above facts of the applicants have been verified and found correct. Forwarded application is not beyond the quota allowed to the department/ program. Application is recommended for hostel admission.

Date

(Signature & Seal of HOD)

ISSUED INVENTORY ITEMS IN ROOM PLEASE MENTION

Signature of Applicant

FOR OFFICE USE ONLY (ALLOTMENT DETAIL)

ALLOTTED HOSTEL

ROOM NO:

DATE OF ALLOTMENT:

HOSTEL FEE RECEIPT NO.:

DEPOSITED AMOUNT:

Remark (if any)

Signature of Warden

Signature of Admin Warden

UNDERTAKING BY THE STUDENT

I _____ Son/ Daughter/ Ward of
Mr./Ms _____

Hereby provide following undertaking.

- a) That all the information given above are true to the best of my knowledge.
- b) I understand that the University shall not be responsible for any mishap outside its premises.
- c) I understand that I will take care of my belongings and the university not be responsible for any theft in my hostel room.
- d) I will vacate the hostel during summer vacation or any time if the situation demands it.
- e) I am fully aware that Central University of Jharkhand administration reserves its right to change/ modify the rules and regulations of the hostel/ campus and I will abide by the same.
- f) I shall follow the hostel manual strictly.
- g) I am also aware of the fact that at any stage, If I am found violating the above undertaking, and rules mentioned in hostel manual the university may take disciplinary action which includes rustication from hostel with immediate effect and even expulsion from the University.
- h) No motor bikes are permitted in the hostel.

Father/ Mother/ Guardian's Signature

Name of the Student:

Date:

With Signature:

DECLARATION BY THE STUDENT

I have read carefully, the Hostel manual and Admission Rules, Central University of Jharkhand and agree to abide by them, both existing and if amended from time to time and submit myself to the disciplinary jurisdiction of Central University of Jharkhand. I shall neither indulge myself nor instigate any other student(s) in ragging. I shall also not indulge in or create any kind of nuisance to the academic atmosphere of the Hostel. In case any act of misconduct on my part is found, I shall be liable for any disciplinary proceedings/ actions against me by the University under information to my Parent/ Guardian.

I also declare that I am fully aware of my health status and can take care of myself.

Place:

Signature:

Date:

Name:

Department:

Semester:

Hostel:

Room No:

Father/ Mother/ Guardian's Signature

GENERAL DECLARATION BY PARENT/ GUARDIAN

I / We have read carefully, the Hostel manual and Admission Rules of Central University of Jharkhand, and I/ We hereby agree to ensure that my/ our son/daughter/ ward:

Name: CUJ Reg.

No.....

Program of study:

Semester No: Departmenet of

.....

Shall abide by all the rules and regulations of the Hostel and the University, both existing and that may be amended from time to time and submit him/ her to the disciplinary jurisdiction of the Central University of Jharkhand. I have explained to my ward the action(s) that may be taken in case he/she indulges in ragging or instigates any other student (s)/ person(s) in such activities vitiates the academic atmosphere of the Hostel. In case of any act of misconduct on the part of my ward, he/ she shall be liable for any action as deemed fit by the University and I shall have no objection to any action taken.

I / we declare that I am/ we are aware of the health status/ problem of my/ our son/daughter/ ward and he/ she will take care of his/ her health. In case of any casualties/ mishap (if any) due to his/ her health problems, the Central University of Jharkhand will not be responsible.

Full Name:

Signature:

Place: