

Sr. No. _____ (for office use only)

**GURU JAMBHESHWAR UNIVERSITY OF SCIENCE & TECHNOLOGY,
HISAR
(HOSTEL STAY FORM FOR SESSION 2023-24)**

Note: All columns of this form must be clearly filled by the applicant in his/her own handwriting.

1. Date of arrival : _____

2. Date of leaving : _____

3. Name : _____

4. Mobile No. (Self): _____

5. Email ID : _____

6. Aadhaar No: _____

7. Father's Name : _____

8. Father's Mobile No. : _____

9. Mother's Name: _____

10. Mother's Mobile No. _____

11. Department: _____

12. Course: _____

13. Semester: _____

14. Registration No. : _____

15. Date of Birth : _____

16. Category: DOB:.....General-[] EWS-[] SC/ST -[]

BC A/B-[] EBP-[] PWD [] EWS [] K.M []

17. State : _____

**Paste self
Attested
photograph**

18. Permanent Home Address: _____

19. Local Guardian Name & Address: _____

Local Guardian E-Mail : _____ Mobile no. _____

20. Blood Group: _____

21. Account Detail of student:-

Account No - _____

IFSC Code- _____

Bank name and address.- _____

22. a) Whether you are an old resident of the Hostel: Yes / No

b) If the answer to 22 (a) is yes, give the following details:

i) Hostel _____ ii) Room No. _____ iii) Session _____ iv) Dues if any _____

Recommendation of Coordinator/Warden _____ Signature _____

23. I undertake to abide by all the hostel rules and regulations of the University failing which disciplinary action may be taken against me. I will not keep iron rod/ weapon/ arms of any kind in the hostel. I will not keep and use heater/electric iron/induction etc. Further, I will vacate the hostel any time as per requirement of the University. The undertakings and consents about not involving in activities such as ragging, etc. are enclosed. I abide by the rules and regulations of GJUS&T, Hisar in letter and spirit. Further, No FIR against me in any criminal cases has been lodged till today.

Father/Guardian's Signature

Signature of the Applicant

Date:-

**CERTIFICATE FROM THE CHAIRPERSON/HEAD OF
DEPARTMENT**

It is recommended that Mr./Ms. _____ Son/Daughter of Sh. _____ is a bonafide student/research scholar/project fellow of this Department and may be admitted to the University Hostel. I certify that the address of the applicant given above is the same as given in the admission form of the Department and it is not located within 30 kms. radius of Hisar city. In case the applicant leaves the Department or his/her name is struck off on account of non-payment of dues or other reason, I shall inform the Chief Warden. I shall not issue the Roll No. of the Examination/provisional certificate/transcript of degree to the applicant unless he/she produces a NO DUES CERTIFICATE from the Coordinator/Warden/Dy. Chief Warden/Chief Warden. His/Her position in the Entrance Merit List is _____. I shall also share the responsibility in case of any need by hostel administration in any emergency regarding him/her.

Date :

Chairperson

(with seal)

UNDERTAKING ABOUT RAGGING

I have read clause 7 page 11 of the University prospectus (2022-23) regarding the direction and 'Zero Tolerance' about ragging. I pledge to abide by the directions and guidelines of Supreme Court, Government of India, UGC, State Government and Guru Jambheshwar University of Science and Technology about ragging. If at any stage of my stay in the hostel I am found involved in the incident of ragging I will accept appropriate punishment, fine or both from the university authorities & be ready to face legal action.

Signature of the applicant with date

**UNDERTAKING ABOUT NON-CONSUMPTION OF SMOKING,
ALCOHOL AND DRUGS**

I pledge to abide by the directions and guidelines of Supreme Court, Government of India, State Government and Guru Jambheshwar University of Science and Technology about abuse of drugs and alcohol in the University campus. If at any stage of my stay in the University and hostels, I am found under the influence, possession or consumption of Drugs/alcohol/smoking I will accept appropriate punishment, fine or both from the university authorities & be ready to face legal action.

Signature of the applicant with date

**UNDERTAKING FROM PARENTS ABOUT ALCOHOL AND DRUGS
ABUSE**

My son/daughter has no past record of indulgence in any type of drug abuse or consumption of alcohol. I fully take the responsibility that he/she will continue to maintain non indulgence in drugs and alcohol throughout his/her stay in the University and hostel. If at any stage of his/her stay in the University and hostels, he/she found under the influence, possession or consumption of Drugs or alcohol I will accept appropriate punishment, fine or both imposed on my ward by the university authorities.

Signature of the parents with date

Mother.....

Father.....

CERTIFICATE FROM THE CHAIRPERSON/HEAD OF DEPARTMENT

(For female employee only)

It is recommended that Ms..... D/W of.....is working as.....in this department and may be allotted room in WWH. I certify that the address of the applicant is the same as given in her application and it is not located within 30 KM radius of Hisar city. In case the applicant leaves the department, I shall inform the chief warden. I shall not clear his/her last payment/salary/benefit/issue experience certificate of the applicant unless he/she produces a NO DUES CERTIFICATE from the Coordinator/Warden/Deputy Chief Warden/Chief Warden. I shall also share the responsibility in case of need by hostel administration due to any emergency regarding her/him.

Date:

Chairperson/ Head of the department (With seal)



UNDERTAKING FROM PARENTS/HUSBAND

I.....F/M/H of Mr./Ms. is giving my consent to stay in the hostel. My ward/spouse will abide by all the rule and regulation of the hostel. Further, I will share the responsibility of my ward/spouse in case of any emergency as and when required.



**GJUS&T, HISAR
HOSTEL IDENTITY CARD 2023-24**

Name.....
Father's Name.....
Course.....
Roll No.....
Hostel.....
Room No.....
Permanent Address.....
.....
Tel/Mob.....
Blood Group.....
Email.....
Valid Upto: 30.06.2024

Coordinator/Warden

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Blood Group.....
Email.....
Valid Upto: 30.06.2024

Coordinator/Warden



Hostel Leaving Form

Guru Jambheshwar University of Science and Technology, Hisar

Sr. No. _____

Name of Hostel:	
Session:	
Name of resident:	
Date of Leaving:	
Department/Course:	
Roll No.	
Semester:	
Room No:	
Bank Account No:	
Name of Bank:	
IFSC code:	
Mobile no.:	
Email ID	

Signature

Date