HIMACHAL PRADESH UNIVERSITY'

HOSTEL ADMISSION FORM

(To be submitted in duplicate)

	No	D	ated :
e:	Please tick ($$) the category in which applying (HPU/ Non-HPU/SC/ST/Cultural/Phy. Handicap	ped)	
	Name of the Applicant(in block Letters)	_	Paste Passport size photograph
	Father's Name	_	duly attested by the Chairman.
	Date of Birth	_	the Chamman.
	Do you belong to SC/ST	_	
	Department	_ [
	Class Semester	Cla	ss Roll No
	HPU Registration No		
	In case of Ph. D. Date of Enrolment		
	(i) Nationality (ii) Adhaar Card No. (attach photoco		
	Mobile No. (Self)(Father's)		
	Correspondence Address		
	Telephone No. (with code) Office		dence
	Permanent Home Address		
	Telephone No. (with code)Parents' Mobi (Please attach Domicile Certificate) Name and Address of the Local Guardian (person to be contacted in case of emergency)	le No)
	(a) Relationship with Local Guardian		
	Were you resident of H.P. University Hostel earlier		
			35/110
			Room No
	If yes, give particulars: Name of the Hostel		
			Course

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DECLARATION

I hereby declare that I have gone through and noted the hostel rules and regulations given in the Handbook of Information and understood that strict conformity to this is an express condition for my admission as boarder in the hostel. I further declare that I am a student of day classes of the Department concerned. In case I cease to be a student of day classes, I shall inform the Warden about my changed status immediately and leave the hostel as required under the rules. Further, I will not allow anybody to stay as guest in my room without prior permission of the Warden and I shall pay my mess dues every month regularly. In case, some illegal/unauthorized person is found in my room at any stage, I shall liable to be punished as per the hostel rules including cancellation of my admission in the hostel as well as from the department concerned for this lapse. Moreover, I will not indulge in any act of ragging, indiscipline, misconduct, political and unlawful activities and if I am found guilty of such offence, I will have no claim against the expulsion/rustication from the hostel in compliance to the recommendations of the Hon'ble Supreme Court of India in SLP NO. 24295 of 2006 (Raghavan Committee's Report). I have attached necessary self declaration as per specimen available with this form.

Dated				
Sig	nature of the Applicant			
(TO BE FILLED IN BY THE DEPARTMENT C	CONCERNED)			
This is certified that Mr./Miss had Department of	on the basis of all score (on the basis of			
Final Score on the basis of which admission is made in the department				
-	erson of the Department fice seal)			
Note: No Evening College Student/Employee/ICDEOL/1 for admission in University Hostel.	ocal student is eligible			
FOR USE IN WARDEN/CHIEF WARDEN	OFFICE			
Documented / Not Documented				
Recommended/Not Recommended				
Room No. Allotted Admitte				
•				
Room No. Allotted Admitted Warden	ed			
Room No. Allotted Admitted Warden H.P. University Boys/Girls Hostel	ed			
Room No. Allotted Admitted Warden H.P. University Boys/Girls Hostel Mess Security Receipt No dated _ Signature of Mess Clerk Warden TO BE FILLED IN BY THE CHIEF WARDEN	nN'S OFFICE			
Room No. Allotted Admitted Warden H.P. University Boys/Girls Hostel Mess Security Receipt No dated _ Signature of Mess Clerk Warden	n			

-3-HIMACHAL PRADESH UNIVERSITY'

HOSTEL ADMISSION FORM

(To be submitted in duplicate)

ary	No	Dated:
ote:	Please tick (√) the category in which applying (HPU/ Non-HPU/SC/ST/Cultural/Phy. Handicapp	ped)
	Name of the Applicant(in block Letters)	size photograph
	Father's Name	duly attested by the Chairman.
	Date of Birth	
	Do you belong to SC/ST	_
	Department	
	Class Semester	Class Roll No
	HPU Registration No	
	In case of Ph. D. Date of Enrolment(attach photocopy)	
	(i) Nationality (ii) Adhaar Card No. (attach photoco	
).	Mobile No. (Self)(Father's)	
	Correspondence Address	
	Telephone No. (with code) OfficeI	Residence
2.	Permanent Home Address	
	Telephone No. (with code)Parents' Mobil (Please attach Domicile Certificate)	e No
3.	Name and Address of the Local Guardian (person to be contacted in case of emergency)	
	(c) Relationship with Local Guardian	
	(d) Phone No. (Residence)Mo	obile No
ŀ.	Were you resident of H.P. University Hostel earlier	
	If yes, give particulars: Name of the Hostel	
	Year(s) of stayDepartment	
	Were you ever punished for misconduct/viola	
	indiscipline, etc. Yes/No. If yes, give details	,
	1 , , , , , , ,	

-4DECLARATION

I hereby declare that I have gone through and noted the hostel rules and regulations given in the Handbook of Information and understood that strict conformity to this is an express condition for my admission as boarder in the hostel. I further declare that I am a student of day classes of the Department concerned. In case I cease to be a student of day classes, I shall inform the Warden about my changed status immediately and leave the hostel as required under the rules. Further, I will not allow anybody to stay as guest in my room without prior permission of the Warden and I shall pay my mess dues every month regularly. In case, some illegal/unauthorized person is found in my room at any stage, I shall liable to be punished as per the hostel rules including cancellation of my admission in the hostel as well as from the department concerned for this lapse. Moreover, I will not indulge in any act of ragging, indiscipline, misconduct, political and unlawful activities and if I am found guilty of such offence, I will have no claim against the expulsion/rustication from the hostel in compliance to the recommendations of the Hon'ble Supreme Court of India in SLP NO. 24295 of 2006 (Raghavan Committee's Report). I have attached necessary self declaration as per specimen available with this form.

Date	d		
		Signatur	e of the Applicant
	(TO BE FILLED IN 1	BY THE DEPARTMENT CONC	ERNED)
This is certified that Mr./Miss has been admitted Department of			ore (on the basis of
		Chairperson (with office se	of the Department
Note:	No Evening College Stud for admission in Universi	lent/Employee/ICDEOL/local ity Hostel.	student is eligible
	FOR USE IN WA	ARDEN/CHIEF WARDEN OFF	ICE
Reco	mmended/Not Recomme	ended	
Ward	n No. Allotted len University Boys/Girls Host		
Mess Security Receipt No.			
Signature of Mess Clerk			
	TO BE FILLED IN	BY THE CHIEF WARDEN'S O	FFICE
Hoste	el's dues/securities of Rs.		realized vide
Recei	ipt No	dated	
	_		

UNDERTAKING

Ι	do hereby solemnly affirm and declare that
shall abide by the	provision contained in the H.P. University Act, Statutes
Ordinances, Hostel	Rules and Regulations as provided in the Hand Book of
Information amende	d from time to time. I further undertake not to participate in
any political and of	ther unlawful activities including ragging which harm the
social, academic and	congenial environment of the hostel. In case of any breach
of trust and under	taking I shall be liable for punishment as per rules and
regulations includin	g cancellation of my admission from the hostel without any
notice and also recov	very of damages, if any, from me.
Dated: Place:	
	UNDERTAKING
Ι	do hereby solemnly declare,
undertake that my v	vard Mr. /Ms
Ordinances and Ho Information as amer political and other unacademic atmospher hostel. In case my shall liable to be pure	provisions contained in the H.P. University Act, Statute stel Rules and Regulations provided in the Hand Book of aded from time to time. My ward shall not participate in any anlawful activities including ragging which harm the social re, create indiscipline and spoil congenial environment of the ward indulge in any of such activities at any stage he/shall she has per rules and regulation. His/her admission to the celled without any notice and damages, if any, shall be ther.
	() Name and Signature of the Parent/Guardian
Dated:	Address
Place:	
	·
	Telephone No. with code

(SELF DECLARATION)

I Son	n/Daughter of Shri	
agedyears, resident	t ofHostel	
do hereby solemnly declare that I s	shall not indulge in any act of indiscipline,	
personal or group clashes, violence	and political activities. In case I am found	
indulged in above mentioned activiti	es, strict disciplinary action may be initiated	
against me, which includes expul-	sion from the hostel as well as from the	
University. I further declare that I shall abide all hostel rules meticulously in		
letter and spirit.		
Place:		
Dated:	(Signature of the Applicant)	
	Name (in block letters)	
	Hostel	
	Room No	
	Tel. No./Mob. No	