Paste

Your

Latest

Photograph

Here

GURU JAMBHESHWAR UNIVERSITY OF SCIENCE & TECHNOLOGY, HISAR

(HOSTEL STAY FORM for session 2022-23)

Hostel : Boys Hostel 3

Name : NISHANT KUMAR SINGH

Mobile No. (Self) : 9205959047

Email : nishant220902@gmail.com

Father's Name : ANURANJAN KUMAR SINGH

Father's Mobile No. : 9818376687

Mother's Name : SUSHAMA SINGH

Department : GJUST - Department of Computer Science & Engineering

Course : B.TECH. (INFORMATION TECHNOLOGY)

Semester : 2

Registration No. : 200010140034 Date of Birth : 22/09/2002

Category :

Permanent Address : H. No. - 1025, Sector 29, Housing Board Colony

Visitor`s Details : Anuranjan - 9818376687 - Anuranjan

: Shishir - 9899041178 - Shishir

Blood Group : O+

Aadhaar No. : 0000000000

Account Details

Account No : 90066619765

IFSC Code : SBIN0016108

Bank Name : State Bank of India

Old Residence Details (if you are an old resident of the Hostel)

Hostel :

Room No. :

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 spirit. Further, No FIR against me in any criminal cases has been lodged.

Signature of the Applicant

Date:

Note: Please submit Medical Fitness Certificate with this application form, if you are fresh student.

CERTIFICATE FROM THE CHAIRPERSON/HEAD OF DEPARTMENT

It is recommended that Mr./Ms. NISHANT KUMAR SINGH Son/Daughter of Sh. ANURANJAN KUMAR SINGH 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 UNIVER OF SC

CERTIFICATE FROM THE CHAIRPERSON/HEAD OF DEPARTMENT

(For female employee only)

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
ERSITY	
NIVERSITY OF	5
& GERATIN ST	C'A
Z Z Z	The state of the s
E CREVE	m
	So San
三	m
Z Z	5
	2
200	20
EXCELLENCE	30
HISAR	

UNDERTAKING FROM PARENTS/HUSBAND

Ι.	F/M/H of Mr./Ms	is	giving	my	consent	to	stay	in t	the
ho	ostel. Further, I will share the responsibility of my ward/spouse in case of any eme	rge	ncy as	and	when red	quir	ed.		

Signature of Parents/Husband

Date

