



Central University of Jammu
Application Form for Admission to Hall of Residence
for the Academic Session:.....

Affix Recent
Photograph

1. Name (In Capitals):.....
2. Department:..... Course:
3. Semester:..... University Roll No.:.....
4. Father's Name (In Capitals):
5. Mother's Name (In Capitals):
6. Religion:
7. Category: General/ SC/ST/OBC/ PwD:
8. Nationality:
9. Blood Group:
10. Whether Suffering from any Medical Condition / Illness: Yes: No.....
11. If Yes, Provide details:
12. Permanent Address (As given in the Admission Form):
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- Village / Town: Post Office:.....
- Police Station:
- Tehsil / Block: District:
- State:.....Pin Code:
13. Correspondence Address (if different from Permanent Address):
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- Village / Town: Post Office:.....
- Tehsil / Block: District:
- State:..... Pin Code:
14. Contact Number:
15. E-mail address:
16. Residence Landline No. (with STD Code):
17. Father's Mobile No:
18. Mother's Mobile No:
19. Name of Local Guardian:
20. Relationship with the Applicant:.....
21. Local Guardian Residence Landline No. (with STD Code):
22. Mobile Number of Local Guardian:
23. E-mail address of Local Guardian:

24. Address of Local Guardian:

.....

Village / Town:Post Office:.....Tehsil / Block:District:

.....State:..... Pin Code:

Details of Previous Stay in any Hall of Residence of Central University of Jammu:

1. Name of the Hall of Residence:
2. Duration: From To
3. Department: Course:
4. Whether any Disciplinary Action was taken against you during your stay in the Hall of Residence: Yes No

I, Ms. / Mr..... will abide by all the rules laid down by the Hall of Residence, Central University of Jammu. I assure that I shall follow all the rules of the University for maintaining discipline inside the Department and the Hall of Residence. Further, I am aware that in case I violate any of the rule, I am liable to be fined / expelled from the hostel. In addition, I state that the information provided in this form is true to the best of my knowledge and nothing has been concealed therein. My admission to the Hall shall be cancelled and security deposit forfeited if any information provided in this form is found to be false / incorrect. Further, incomplete application form will be rejected. I understand that filling up this application form does not guarantee admission to the Hall of Residence.

Signature of the Applicant:

Name: Date: Place:

The information provided by my daughter / son / ward in this form is true to the best of my knowledge and nothing has been concealed therein.

Signature of the Parent / Guardian / Local Guardian:

Name: Date: Place:

Recommendation from the Head of Department

Ms. / Mr. has taken admission in the Department of.....in the Course..... in Semester for the Academic Session..... I recommend her / his for allotment of a seat in the Hall of Residence of Central University of Jammu.

Signature of Head of Department with Seal:

Date:

Place:

DOCUMENTS TO BE ATTACHED WITH THE APPLICATION FORM

1. Copy of University Admission Fee Receipt
2. Copy of Proof of Permanent Address
3. Copy of Valid ID Card

FOR OFFICE USE ONLY

Recommendation of the Warden (only for students seeking re-admission):

.....

Ms. /Mr. is admitted to the Hall of Residence,
Central University of Jammu for the Academic Session-

Signature of Warden:

Signature of Dean, Students' Welfare:

ADMISSION DETAILS (TO BE FILLED BY OFFICE)

1. Name of the Student:.....
2. Hall of Residence Fee: Rs.
3. Hall of Residence Security: Rs.
4. Advanced Mess Charges for the Month of: Rs.
5. Payment Details: DD / Cheque Number:
6. Date of DD / Cheque:
7. Name of Issuing Bank & Branch:
8. Receipt No.: Date:
9. Room No. Allotted:

Signature of the Office Assistant:Date

Signature of Warden: Date

Signature of Dean Students' Welfare: Date

Consent Form for Parents / Guardian

1. Name of the Applicant (In Capitals):.....
2. Department:..... Course:
3. Semester:.....
4. Relationship with the Applicant:

I,..... Father / Mother / Guardian of Ms.
..... give my consent for my daughter
/son/ ward to do the following:

1. Travelling back to home alone Yes No
2. Overnight stay at Local Guardian's Residence Yes No

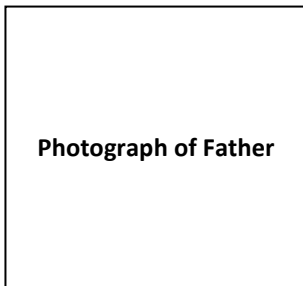
The address of the Local Guardian of my daughter/son/ward is:

.....
.....

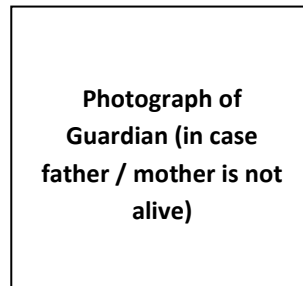
Village / Town:Post Office:..... Tehsil / Block:

District: State:..... Pin Code:

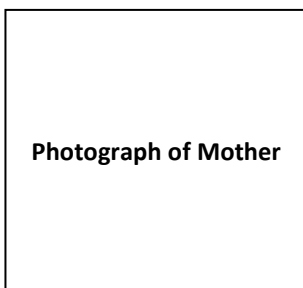
Photographs of the (father, mother) / guardian & local guardian are affixed below:



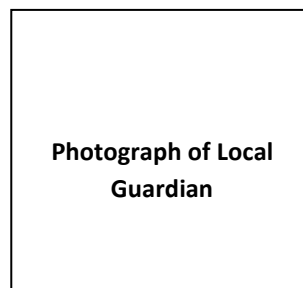
Photograph of Father



Photograph of Guardian



Photograph of Mother



Photograph of Local Guardian

Signature of the Parent / Guardian

Name of the Parent / Guardian

Date Place