

	University Ho	Form No
		on does not guarantee allotment)
Name:(BLOCK LETTER) (First N		Surname)
Department	Course:	Year (I/ II/ III/ IV): Roll No
Address: Village/Street (wit (Attach Proper Document)*	· · · · · · · · · · · · · · · · · · ·	
P.O	PIN	P.S (must be mentioned):
District	Phone No	Mobile
Nationality	Married/U	InmarriedBlood group
		racter certificate from the same:
		Occupation
Monthly Income Rs(Attach Proper Document)*		Signature
	Phone No	Signature
Name & Address of Guardia	an/Local Guardian with	phone No
Whether belongs to : SC/ST (If applicable put a Tick ($\sqrt{\ }$	OBC -AOBC-B/PH	
Whether represented J.U. fo		petition or admitted in Sports Quota: Yes/No.
I do hereby affirm that th undertakethat I shall not p	ne information submit articipate in, abate, or j s set in for hostel from	Rsted by me are true to the best of my knowledge and I do hereby propagate ragging in the hostel premises.*** I assure you that I will time to time. University may take any action against me as per rule if
Signature of the Candidate v		Authenticated(Signature of the Guardian witdate)
** Income certificate from t	he employer (with offic d other similar higher of	ential certificate issued by Gazetted officer/ Employer. e seal) for the employed person and for others from the Gazetted ficial.Submission of attested copy of Income-Tax Return may also be
portal: www.antiragging.i time of admission (Hostel)	n/ www.amanmovementat Dean of Students of	
	hip Application Form N	fo
01 UG / FG / F	vi.i iiii / K.S uiiuci	department
Date:		Signature of Dealing Asstt. (D.O.S.Office):

Price Rs. 10/-