| Sr. No. | R | egd. No | | | |
|--------------|--|--|--|--|--|
| | PANJAB UNIVERSITY HOSTEL ADMISSION FORM Session 2019-2020 (Incomplete Form shall not be entertained) | | | | |
| | | | | | |
| 1. | Name of the Applicant (IN CAPITALS): | Affix one and attach | | | |
| | | three copies of pass- | | | |
| 1.a. | Date of Birth | port size recent photo- graph duly attested by | | | |
| 2. | Father's name : | the Chairperson of the | | | |
| 0 | Matherinana | Department concerned | | | |
| 3. | Mother's name | | | | |
| | a. Guardian's Namo (If father not alive) & relation | | | | |
| | a. Guardian's Name (If father not alive) & relation | | | | |
| | b. Father's/Guardian's occupation and income | | | | |
| 4. | Permanent Address: | | | | |
| | (same as given in the admission form and submitted to the Department) [Te | lephone No | | | |
| | N | Mobile e-mail | | | |
| | Current Residential Address : | | | | |
| | (same as given in the admission form) (self-attested copy of residential proof to be attached) [Te | lephone No | | | |
| | to be attached) | Mobile | | | |
| 5. 6. | NationalityDepartmentClass Name, occupation and address of the local guardian | | | | |
| 7. 8. (a) | Tel. No.: ResidenceOffice | No | | | |
| | Hostel NoRoom NoBlock No | | | | |
| | stayed fromtoto | Mobile No. : | | | |
| (b) | Class | 9, give particulars | | | |
| | Examination Roll No | | | | |
| | (IN CASE YOU HAVE FAILED OR NOT APPEARED IN THE EXAMIN SESSION 2018–2019, YOU ARE NOT ALLOWED HOSTEL ACCOMMON SESSION 2019–2020. | NATION/S DURING THE DDATION DURING THE | | | |
| 9. | If you were ever punished for misconduct/violation of Hostel Rules/Indiscipline etc | c., give particulars | | | |
| 10. | Last examination passed University Year Roll No. Perce | ntage of Marks obtained | | | |
| 11. | Did you join any class of any department in the preceding year Yes/No. Deptt | Result Class | | | |
| 12. | Extra-curricular Activities/Hobbies. | | | | |
| 13. | Whether you are maintaining two wheeler in the hostel? Yes/N If yes, give registration number of the vehicle | correct and nothing above or become ineligible for all not maintain four wheeler in an. I have read the hand book ulations of the university and bean Student Welfare/other ong with my Parents/guardian | | | |
| | have signed this undertaking with regard to ragging prohibition. If I furnish any wrong cancelled and my hostel fee & security be forfeited. | information, my seat may be | | | |

Dated.....

(FOR USE BY THE CHAIRPERSON OF THE DEPARTMENT CONCERNED)

| 15. | The applicant is a bonafide student of class | | |
|-----|--|-------------------------------|--|
| | | Chairperson (Office Stamp) | |
| | (FOR USE BY THE WARDEN) | | |
| 16. | ADMITTED : Room NoBlock No | | |
| | | Warden | |
| | (FOR USE BY THE HOSTEL OFFICE) | | |
| 17. | Hostel Roll NoAmount Received | (Rupees) | |
| | Receipt NoDated | | |
| | Clerk | Assistant | |

E2/P.U.P. (60)-12,500/03-07-2019

PANJAB UNIVERSITY, CHANDIGARH TO BE FILLED IN BY OWN HANDWRITING OF THE STUDENT 2019-2020

| 1. | Name of the Applicant (IN CAPITALS) | | | _ |
|-----|---|---------------------|---|----|
| 2. | Father's Name & Occupation | | | |
| | (IN CAPITALS) | | | - |
| 3. | Mother's Name | | | |
| | (IN CAPITALS) | | | _ |
| 4. | Date of Birth | | | |
| 5. | Address: a) Permanent | | | _ |
| | Phone | | (Mobile) | - |
| | b) Correspondence | | | - |
| | Phone | | (Mobile) | - |
| 6. | Name, occupation and address | | | |
| | of the local guardian | | | _ |
| | | | | _ |
| | Phone | | (Mobile) | - |
| 7. | Deptt. Class and Roll No. | | (Mobile) | _ |
| /. | Dept. Class and Roll (V). | | | - |
| 8. | If you were resident of any hostel o | f Panjab Universi | | - |
| | Course | Year | Hostel/Room No | |
| | Duration of stay in the P.U.R.C | Ludhiana Hostel_ | | _ |
| 9. | Family Income | | | |
| 10. | Category: SC/ST/OBC/General _ | | | |
| 11. | Did you join any class in any deptt | | | |
| | the preceding year? | | Department | _ |
| | | | Result | |
| | LEMN DECLARATIONS: I, solemn been concealed therein. | nly declare that th | the information given above is correct and nothin | ıg |
| Dat | ed | | | |
| | | | (Signature of the Applicant) | |

| Panjab University Hostel No |
|-----------------------------|
| Hostel Roll No |
| Name |
| Father's Name |
| Postal Address |
| Phone No |
| DepartmentClass |
| BlockRoom No. |
| Date of joining the Hostel |
| Signature of the Resident |

Must affix latest passport_size photograph

Warden

INSTRUCTIONS

- 1. This card testifies the student's status as a resident of the University hostel.
- 2. This card is not transferable. The resident should always keep this card in his/her room. It should be available for inspection when demanded by the D.S.W./D.S.W.(W)/Warden or any other person authorised by D.S.W./D.S.W.(W)/Warden on his/her behalf.
- 3. The card should be carefully preserved, as no duplicate will ordinarily be issued. In case of loss, a duplicate card will be issued on payment of Rs. 100/-.
- 4. The card is valid for the session 2019-2020 only.
- 5. The resident while leaving the hostel at the end of the academic year or in the mid session, must return the card to the office of the Warden, failing which the resident will have to pay Rs. 100/- before the securities are refunded.

Dean Student Welfare

PANJAB UNIVERSITY CHANDIGARH



HOSTEL IDENTITY CARD 2019-2020

| (Declaration to be signed by the parents/guardian) Name of the Resident | |
|--|--|
| Father's Name : Shri | |
| Father's Name : Shri | |
| and AddressPhone No | |
| Phone No | |
| | РНОТО |
| Department | |
| Hostel Block/Room No | |
| Certified that Mr./Ms | |
| Commod mat ATTA 15 | (Dhata ha attacted has the Chairmannan |
| Whose particulars are given above has sought admission t | |
| | |
| the hostel with my consent. I declare that I shall be | |
| responsible for his/her proper conduct and regular paymen of all his/her dues. | Address |
| Dated | |
| L'alle d'alle d' | |
| | HOSTEL NO |
| (Particulars of residen | t for session 2019-2020) |
| | |
| 3lock/Room NoRoll No | |
| Block/Room NoRoll No | |
| Name | |
| Name | |
| NameFather's/Guardian's Name | |
| Name | |
| Name | РНОТО |
| Block/Room NoRoll NoRoll | |

CONSENT LETTER FROM PARENT

| Date://2022 | | | | |
|---|--|--|--|--|
| To The Chairperson | | | | |
| Panjab University | | | | |
| Chandigarh | | | | |
| Sub: Consent to send the ward to the university on Re-opening day for regular classes. | | | | |
| Ref: Covid-19 pandemic restrictions SoPs & Guidelines. | | | | |
| Dear Sir/ Madam | | | | |
| With reference to the above and as per the directions received from the reading the guidelines from the Government of India for following Starting regular classes for students at the college/university, I we son/daughter/ward Mr./Ms | andard Operating Procedures buld like to send my tudying in Year | | | |
| I understand and agree to follow and instruct my ward to follow all safety measures for protection from Covid-19 pandemic and also to abide by the rules and regulations issued from the college/university for safety and health of my ward and fellow students at the college/university. | | | | |
| Signature & Name of the Student Date Place | mature & Name of the Parent | | | |

PANJAB UNIVERSITY UNDERTAKING TO BE GIVEN BY THE HOSTEL RESIDENTS FOR VACATING THE HOSTELS If THE SITUATION DEMANDS

 ${\bf I}$, , With Registration No. - , Enrolled as the student in the Department of Panjab University, Chandigarh

do hereby undertake that as a hosteller, I hereby solemnly promise that:

| 1. | If the situation demands, I will Accommodation. | vacate the hostel and leave University | | | |
|----|---|---|--|--|--|
| 2. | I am going to visit the University hostel on in my Hostel Room, on my own risk with the knowledge of my parents. | | | | |
| 3. | I am in good health condition and I have no history / contact of Covid-19. I will contact either the University Health Centre in the campus, if required. | | | | |
| 4. | As per the Govt. set of laws, I downloaded the Arogya Setu App. in my mobile phone and update the same as and when requires. | | | | |
| 5. | I will wear a face mask all the time and will maintain social distancing in the Campus and sanitization and wash the hands frequently. | | | | |
| 6. | I will abide by the latest COVII | 0 19 norms issued by the Central/State Governments. | | | |
| 7. | I will fully cooperate with the University authorities concerning Covid-19 and security measures undertaken. | | | | |
| 8. | I shall strictly observe and abi | de by the code of conduct of the Hostel. | | | |
| 9. | I will be solely responsible for | my safety and protection to my native place. | | | |
| 10 | 10.I have received two doses of COVID-19 vaccination | | | | |
| | Student's Signature | : | | | |
| | Name of the Student | : | | | |
| | Hostel Name | : | | | |
| | Room No | : | | | |
| | Contact No. | • | | | |
| | Date | | | | |
| | Chairman of Department of | | | | |

UNDERTAKING BY THE STUDENT/PARENTS (2021-22)

| | | | S/0, D/0 of Mi | r/Mrs/Ms |
|----------|---|----------------------------|----------------------|---------------|
| | | have | carefully read: | and fulls |
| | understood the law | prohibiting ragging an | d the direction | e of the |
| | Supreme Court and th | e Central/State Government | nent in this reas | od |
| 2 | I have received a co | pry of the LIGO Regi | lations on Cur | hina the |
| | Menace of Ragging | in Higher Educational | Tactions on Cir | ome the |
| | have carefully some th | m riighet Educational | msmunons, (20 | 109) and |
| 2 | have carefully gone th | rough it. | | |
| 2) | - Thereby undertake tha | | | _ |
| | I will not indulg | e in any behaviour or a | ict that may con | ne under |
| | the definition of | ragging. | | |
| | | pate in or abet or pr | opacate raccina | in may |
| | form. | itd to rance or his | opagate ragging | in anth |
| | | | | |
| | . I will not huit a | anyone physically or pa | sychologically o | or cause |
| | any other harm. | | | |
| 4. | I-hereby agree that if f | ound guilty of any aspe | ct of ragging. I | may be . |
| | punished as per the p | | | |
| | above and/or as per the | | | |
| 5 | | | Had an dabawa | d fram . |
| ٥. | I hereby affirm that | | ned of debarred | u nom |
| , | admission by any institu | ition. | 1.191 | |
| 6. | I will not possess/carry | any lethal weapon on | the University C | Lampus |
| | and if any weapon is re- | covered from me, I be ru | isticated. | |
| 7. | I have never been conv | icted under any crimina | I offence. No F | I.I.R. is |
| | registered against me ar | nd no criminal proceeding | ngs are pending | against ' |
| | me. | , A. | | • |
| | | O:R | | |
| | F.I.R./s is/are registere | ed against me & crin | ninal proceedin | gs are |
| | F.I.R./S 15/are registere | of agamst mo to other | | |
| | pending in the court of | 1 is anthonity of | in good condu | ict and |
| | However, I assure the | University authority of | my good condu | ice and |
| | behaviour as per Univer | sity admission rules. | | |
| | | | | |
| | - | Signature of the Stude | nt: | ٠.,٠ |
| ^ | | Name: | - | |
| - , | - | Address: | | • |
| Date: | • | Address. | - | Ŧ |
| | • | | | 4 |
| 1 1 12 | y fully endorse the unde | rtaking made by my chi | ld/ward. | - |
| I hereo | y Ithly endorse the area | | | |
| | | Signature of Mother/F | ather and/or Gu | ardian |
| | | orginature of manner. | 1 | • |
| | | | | |
| Witnes | S: | | | e . |
| 111100 | • | | vac it committeery | for each same |
| NOTE: | In compliance of the 2 nd An | nendment in UGC regulation | no, it compared in | ng.in & |
| condent. | In compliance of the 2 nd An to submit on line undertak | ing every academic year | at www.tr.diffitaggs | |
| Wayne an | anmovement.org . | | | • |
| | | | , | • |
| | · · | • | | |