

OLD/ NEW STUDENT

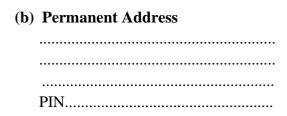
SESSION:

1. Candidate's Name (In block letters) 2. Father's Name 3. Father's Mobile No. 4. Father's Email Id. 5. Mother's Name Mother's Mobile No. 6. 7. Mother's Email Id 8. Name of the Admitted Course 9. Name of the Department 10. Student's Mobile No. and Email Id 11. Category - GEN/SC/ST/OBC/EWS 12. Date of Birth Ph No. 13. AADHAR No.

NAME OF HOSTEL:

Photo of the Student

14. (a) Address for Communication



15. Educational Qualifications

S.N.	Examination Passed	Board/University	Year of Passing	% of Marks Obtained
1.	High School or Equivalent			
2.	Intermediate (10+2)			
3.	Graduation			
4.	Post Graduation			
5.	Certificate of last Exam			



OLD/ NEW STUDENT

SESSION:

Name &	& Address	of Local	Guardians a	and Visit	ors & the	eir Relationsh	ip with t	he Candidate
(1	Aaximum	Two) (FO	R GIRLS O	NLY):				

Attestation by Parents					
Signature of Visitors/LG	1 2				
2					
1					

DECLARATION BY THE CANDIDATE

I son/daughter of

declare that:

- 1. All the filled entries are correct & true.
- 2. I am not suffering from any serious/communicable/infectious disease.
- 3. I shall abide by the rules and regulations of the hostel from time to time.
- 4. I will behave decently with all wardens, matrons, office staffs and co-mates of the hostel.
- 5. I have not taken part in any activity subversive of law and have not been devoid by any University/Institution for seeking admission or appearing in examination. I also declare that I have never been devoid/rusticated/expelled by any University/Institution for being indulging in any unwanted/unlawful activity.
- 6. If I am found responsible for damage to hostel property, the fine shall be recovered from me or from my caution money. In case individual responsibility cannot be fixed, then collective fine may be imposed on me by the University.
- 7. I also understand that if I am found guilty of misconduct/misbehavior/indiscipline, I will be immediately expelled from hostel and will be responsible for any action taken by university authority and that will be binding on me.
- 8. I declare that I have read all the regulation, rules and procedures for the admission in university hostel and as applicable from time to time I shall abide by all such regulation, rules and procedures.
- 9. I am very much aware about the available facilities in the hostel where I have been allotted the room.
- 10. I have been provided the hostel rules and regulations of GGV, and I am fully aware and agree to that, if I will not follow these rules and regulation, in that case hostel administration/university authority may expelled me from the hostel as per the rules.
- Date:

Place:

Signature of the Student

ADMISSION VERIFICATION CERTIFICATE

Ms/Mrs/Mr.			has	been	admitte	d to
(Name of the Course and Semester)	•••••		in t	he de	partment	of
as a regular student i	in tł	he Se	ssion.		•••••	.,the
duration of the course is of semesters.						
Date:						
Place:		H	lead o	f the I	Departm	ent

Signature & Seal



HOSTEL ADMISSION FORM

GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.)

OLD/ NEW STUDENT

SESSION:

Declaration by Parents/Guardians

I parent/guardian of hereby declare

that:

- 1. My son/daughter will follow the rules and regulation of the University hostel system.
- 2. I will be fully responsible for the conduct and behavior of my son/daughter during his/her stay in the hostel and he/she will not be involved in any act of indiscipline. If he/she is found to be involved/indulged in any such activities, then as per university norms, the disciplinary action will be taken against him/her.
- 3. In case of the medical needs of my son/daughter I fully authorize the Hostel/University authorities to take decision and act accordingly. I will not raise any objection on the decision taken by them. In case of any expenses incurred for providing medical facilities to my son/daughter, I will make full payment immediately. I also commit that I or any authorized person by me will reach to the hostel to take charge of my son/daughter within 24 hours of intimation of any medical issue related to my son/daughter. If I don't attend my son/daughter without assigning cogent reasons, I will be fully responsible for his/her condition/consequences/situation.
- 4. If the medical fitness certificate provided by my son/daughter is found false or is hidden any chronic/long medical information/history, the admission of my son/daughter in hostel may be cancelled by hostel authority.
- 5. I will be fully responsible for the whereabouts of my son/daughter during the weekends when he/she will go out from the hostel for academic/non-academic purposes as well as when he/she will go to home. I assure that in both cases, he/she will maintain hostel timings and in case, any mishaps happen to him/her, I will be solely responsible for his/her activities/ situations/ consequences.
- 6. I am very much aware about the available facilities in the hostel where my ward is going to be admitted.
- 7. I have been provided the hostel rules and regulations of GGV, and I am fully aware and agree to that, if my ward will not follow these rules and regulation, in that case he/she can be expelled from the hostel as per the rules.

Date: Place:

Witness:

1

Name & Signature of Parents/Guardian

Phone/WhatsApp No.

2



4

HOSTEL ADMISSION FORM **GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.)**

OLD/ NEW STUDENT

Medical Fitness Format

(From Registered MBBS/MD Practitioner)

This is to certify that Mr/Ms/Mrs..... is medically fit to stay in hostel and he/she is not suffering from any infectious disease.

Name, Address and Mobile No of **Registered MBBS/MD Practitioner**

Signature & Seal

Attestation by Parents

Photographs of the Parent/Guardian

Local Guardian Mother Father Local Guardian

Verified by Parent

List of documents required to be enclosed along with the hostel admission form:

- Prescribed complete hostel Admission form. 1.
- The hostel fee has to be deposited through online (UPI) in to the accounts of respective hostels provided by the 2. hostel administration. Only online payments are accepted in the hostels of university.
- Self-Attested copies of High School Certificates (10+2) Examinations. 3.
- Self-Attested copies Caste Certificate/Physically challenged (if required). 4.
- Self-Attested copies Character Certificate from the head of the institution last attended. 5.
- Photocopy of the medical certificate provided by the MBBS doctor or in the format available admission 6. application must have the signature and seal of the MBBS doctor.
- 7. Recent Color Photographs of the Applicant & Parents.
- Copy of the Aadhar Card. 8.
- 9. Course Seat Allotment letter from Head of the Department.
- 10. Signature of Head of the Department on the Admission Form.
- Copy of the first page of the bank account pass book of the candidate. 11.

Date Place.....

Signature of the Place

parent/GuardianPhone No.

SESSION:





OLD/ NEW STUDENT

SESSION:

DETAILS OF BANK ACCOUNT OF THE STUDENT FOR REFUND (FOR REFUND OF HOSTEL and MESS Fee)

1. NAME OF THE STUDENT:	
2. WING & ROOM NO.:	
3. SEMESTER & COURSE & D	DEPARTMENT:
4. NAME OF THE BANK:	
5. NAME OF BRANCH:	
6. IFSC CODE OF THE BANK:	

7. BANK ACCOUNT NUMBER OF THE STUDENT:

8. MOBILE NUMBER:

.....

Enclosure: Self attested photocopy of the front-page bank pass book

Signature of the Student

Note:

- **1.** Refund will be through NEFT/RTGS/Other online mode to the respectivebank account of the student directly.
- **2.** The name of the student in their bank account must be same as the name registered in the hostel record.
- **3.** Account number must be only of the student. Guardian /parents account number should not be mentioned in this form.



OLD/ NEW STUDENT

SESSION:

DECLARATION BY THE OLD STUDENTS FOR READMISSION

I so	on/daughter of	of Department
declare	that I was admitted in hostel	
in session		
For the readmission in hostel	for the session	1
I also declare that the information furnis	shed by me is true to the best of my	knowledge and belief. In
case the information furnished above by	me is found wrong at any time, my	readmission to the hostel
will be cancelled outright and I will be pe	ermanently debarred from readmission	on in university hostels and
also disciplinary action may be taken ag	ainst me. I undertake that I was not	involved in any unwanted
activities during stay in last session in ho	ostel Moreov	er, I also declare that there
are no any pending disciplinary actions a	against me.	

Date.	•••••
Place	••••••

Name & Signature of the Student



HOSTEL ADMISSION FORM

GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.)

OLD/ NEW STUDENT

HOSTEL ROOM ALLOTMENT FORM

NAME OF HOSTEL:

1. Student Name

:

:

:

:

:

:

:

- 2. D.O.B.
- 3. AADHAR No.
- 4. Department
- 5. Admitted Course
- 6. Blood Group
- 7. Room No. & Wing

Photo

ALLOTTED ITEMS

S.N.	Particulars	Item No.	Quantity	Comment
1	Bed(Steel/Wooden)			
2	Study Table			
3	Chair			
4	Almirah (Steel/wooden/fixed)			
5	Ceiling Fan			
6	Tube light Set			

Declaration

Ideclare that above information given by me is true and fully authentic. I have received all items of my use intact and without any damage as mentioned above. In case of any damage to these items, I will be responsible and I give my consent in writing for the deduction of repairing charges from my hostel caution money, if needed.

Signature of Student

Name of Student.....

Date: Place:



OLD/ NEW STUDENT

SESSION:

For Office Use Only

Mr/Ms/Mrs. is recommended for admission in the hostel.

Hostel Admission Fee Rs......is deposited by Transaction ID No......dated

Room Number is allotted. Hostel Admission Card / Identity Card may be issued. Name is entered into Attendance Register of the Hostel.

Date:

Hostel Staff/Matron

Warden (Admission In-charge)

Administrative Warden



GURU GHASIDAS VISHWAVIDYALAYA, BILASPUR (C.G.)

FORM FOR HOSTEL IDENTITY CARD

Session-....

<u>Instruction:</u> - Kindly fill up the details in CAPITAL LETTERS. Please paste latest colored photograph with <u>WHITE BACKGROUND</u> in the box. Do not put signature of stamp on photo.

1. ROOM NO.	— White Background Photo
2. STUDENT'S NAME	_
3. FATHER'S NAME	_
4. MOTHER'S NAME	_
5. DATE OF BIRTH	_
6. BLOOD GROUP	_
7. PERMANENT ADDRESS	
PINCOI	DE
8. STUDENT MOBILE NO	
9. PARENT's MOBILE NO	
10.VALIDITY OF I -CARD - FOR SESSION	
The student Mr has been ad	mitted in the
Hostel and allotted Room No in the session	Kindly
issue the Hostel Identity Card, which will be valid only for aca	demic session

Admin Warden

Warden

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