



OFFICE OF THE DIRECTOR
UNIVERSITY HOSTELS
DECLARATION / UNDERTAKING FORM

1. Full Name of the Student :
2. Father's Name :
3. Name of the Department/Subject :
4. Name of the College :
5. Previous Mess Card No :
6. Address (as per Aadhaar Card) :
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.....
7. Phone number & Email ID :
8. Name of the Present Hostel & Room No. :

- I hereby declare that, the above information given by is are true to the best of my knowledge and belief.
- I hereby declare that, I am not suffering from any serious/contagious ailment and don't have any COVID-19 symptom such as – Cough/Fever/Breathlessness/Sore throat/Runny Nose/Body ache/others.
- I will carry my sanitizers at all times and I will wear face cover/mask in all times.
- I will maintain the distance at least 6 feet at provided hostel room with my roommate.
- I know that, no hostel boarder is allowed to cook food or prepare tea in his/her room. Use of cooking material is strictly prohibited.
- Smoking or drinking or use of any other intoxicant by the hostel boarders or their guests is strictly prohibited.
- I also know that, non-boarders are not allowed to enter into my room, failing which action may taken against me and non-boarder.
- **I know that, the gates of the Ladies Hostels will be closed at 9.00 pm and late entry without prior permission shall be taken as a serious offence.**
- I have been vaccinated and undergone Covid-19 test for negative report (enclose with this form).
- I hereby, promise to abide by the all hostel accommodation rules during COVID situation and I am solely responsible for any personal risk.
- If I ignore the instructions of the authorities, I may be subjected to disciplinary action that may include eviction from the Hostel.

SIGN. OF THE STUDENT

SIGN. OF THE HEAD WITH SEAL

(FOR OFFICE USE ONLY)

Section Incharge

Superintendent

Director