

Format of Undertaking on Rs.10 stamp paper and notarized

IS/o. Mr/Mrs.....

have carefully read and fully understood the Hostel Guidelines 2019-20 and hereby undertake that:

- I understand that I am being given admission in the hostel provisionally for one course only. If I change the course/program or take admission in some other course I will be treated as a fresh candidate for Hostel Admission
- I undertake that Hostel allotment is a purely temporary in nature and I shall not claim any change from 3 bedded rooms to two bedded room as a matter of right.
- I agree that accommodation will be allotted to me on the terms and conditions given in the Hostel Guidelines/Rules or such modification thereof as may be made by the management of the hostel from time to time.
- I will abide by the decision of the Hostel Administration taken from time to time in all matters such as accommodation, tariff, tenure, discipline and conduct etc.
- I declare that the particulars given by me in admission/renewal of admission form are correct .Subsequently if information/particulars are found to be wrong my allotment will stand cancelled.
- In case I fail to secure **50% marks** in my semester examinations as approved by JMI or I fail to furnish a satisfactory progress report from my supervisor/HOD my admission from the hostel shall stand cancelled.
- I will not indulge in any behaviour or act that may come under the definition of **ragging**. I will not participate in or abet or propagate ragging in campus in any form, I will not hurt the fellow hostel mate either physically, emotionally or psychologically or cause any harm. If found guilty of such indiscipline / misconduct I may be punished as per the provisions of the UGC/University/Hostel regulations including immediate cancellation of hostel.
- I shall not allow any un authorized person in my room without prior permission from Sr. Warden/Warden and shall abide by the Hostel Guidelines/By-Laws/norms (inclusive of mess rules) and office orders issued from time to time.
- I hereby agree that I shall pay the **mess charges in advance**. I am also aware that the same is liable to be revised .Further **if I don't use the mess services I shall pay the Mess maintenance charges @ Rs.500/- p.m.**
- I know it and understand and commit that in special exigencies or refurbishment /renovation/repairs or any other such situation , the university shall have the right to get the hostel premises vacated in short notice and that I shall immediately and forthwith on receiving any such orders/directions shall vacate the same without any resistance or objection whatsoever.
- I shall not misuse the Internet facility provided to me in the hostel .In case any misuse /unlawful act is detected /reported against me hostel admission will stand cancelled.
- The non-compliance of any laid down norms shall lead to cancellation of my hostel admission.
- I hereby affirm that I have not been expelled or debarred from admission by any institution previously studied.
- I shall not bring /park any four wheelers in the Hostel campus .If found to be indulge in this act my hostel shall stand cancelled.

OFFICE OF THE PROVOST
HALL OF BOYS' RESIDENCE
JAMIA MILLIA ISLAMIA
NEW DELHI.110025

MEDICAL CERTIFICATE

(Students are required to submit a Medical Certificate from the Medical Officer of the University Health Centre after proper check-up)

This is to certify that I have examined

Mr _____

Son of _____ student of Class _____

Year/Sem _____ Department/Centre _____

On _____ and have found him medically fit for stay in the University Hostel.

Date:- _____

Signature of Chief Medical Officer/Medical Officer
With stamp
Ansari Health Centre

Other Information's

Blood Group: Allergic to (Drug etc.)

Category:-Tick at the appropriate place :-

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|-----|--|-----|--|-----|--|-----|--|-------|--|----|--|---------|--|
| Gen | | OBC | | PWD | | J&K | | SC/ST | | NE | | Foreign | |
|-----|--|-----|--|-----|--|-----|--|-------|--|----|--|---------|--|

Local guardian name & contact number, e-mail : _____

Address: _____

_____ **e-mail:** _____

Signature of the candidate