Disclaimer: The Hostel authorities shall have no liability towards the hostel resident when she is on leave from the hostel or she is outside the hostel campus. They shall not be held responsible, if the resident leaves the hostel without prior permission or information or does not report for attendance at night in the hostel or when she leave the hostel after taking leave permission.

For office use
1 of office asc
Hostel
Room No.
1100111110
Category.



Affix a passport size self attested photograph

Begum Hazrat Mahal Girls' Hostel JAMIA MILLIA ISLAMIA

Maulana Mohammed Ali Jauhar Marg, New Delhi - 110025

APPLICATION FOR HOSTEL RE-ADMISSION (Session 2025-26)

INSTRUCTIONS

- 1. All entries are to be filled in ink by the candidate in English.
- **2.** Application form should be accompanied by Two(2) passport size photographs and attested copies of following documents:
 - a) Fee receipt of admission to the course
 - b) Mark-sheets of Last Examination
 - c) Affidavit from Parents for financial guarantee and authorization of local guardians
 - d) Undertaking from local quardians
 - e) Address Proof* of Parents
 - f) Address proof* of local guardian I
 - g) Address proof* of local quardian II
 - h) Applicant's undertaking to abide by Hostel Rules and disciplinary norms.
 - i) Medical fitness declaration
 - j) Fee for Renewal Application (Rs 100/-)
- **3.** Incomplete form, without the above documents, will be rejected and incorrect information shall cause cancellation of admission at any time.
- **4.** The admission will be valid for current academic session only.

Note: Updated Affidavits for the academic session 2025-26 has to be submitted along with the Renewal/Re-admission Application Form.

^{*}One of the following documents should be submitted as residence proof: Water/Telephone (landline or post paid mobile bill)/Electricity bill/Statement of running bank account (Scheduled Commercial bank excluding Regional Rural banks and local area banks)/ Income Tax Assessment Order/Election Commission Photo ID card/Gas connection bill/Certificate from Employer of reputed and widely known companies on letter head/Aadhaar Card/Passport)

APPLICATION FOR HOSTEL RE-ADMISSION (Session 2025-26)

Name of			where	_	_				_					
	Mar	ks ii	n Last Ex	amina	tion		Per	cen	tage					
			PAR	TICUL	ARS OF	THE	APPI	LICA	NT					
(a) Name (In	Block L	ette	ers):	•••••			•••••					•••••		
(b) Course :			. Year:		. Subjec	ct:			Dur	atio	n:	• • • • • •		
Internship	require	ed tl	his year:	Yes/I	No		Durat	ion	of Int	erns	ship:	•••••		
(c) Student I	D:	•••••			Enr	rolme	ent N	o:						
(d) Date of E	3irth:		Na	ationa	lity:			Ma	rital St	tatu	s:			
(e) Contact	No:	• • • • • • •			. Eı	mail	ld:	•••••		•••••		•••••		
(f) Details o above co			•		-			•						
(g) Whethe	r all pre	viou	ıs dues c	leared	l: Yes/N	0			(to be	verif	ied by c	office	·)	
(h) For Ph.D been su			dents: W a prescri		_		•		last s	eme	ester h	nas		
(i) Do you	belong [·]	to: 1	Γick appr	opriat	e colum	nn								
PWD	GEN		SC	ST	ОВС		NE		J&K		NRI		SAARC	
(j) Motorbik	e/Scoot	er (i	f any):							_Re	gn No.	.(At	tach RC).	
Date									Sign	atur	e of t	he A	Applicant	, ,
APPLICATION TO DIRECTOR OF CEN		FIED A	AND SIGNI	ED BY T	HE DEAN	OF FA	CULT	// HI	AD OF	THE	DEPAR'	TME	 NT CONCER	RNED ,
Certified that														
Year						•			-					
paid her fees v	vide Ban	ık sc	roll No			da	ated :	·		•••••				
Data								,						
Date	•••••						(Se		Signatu the De		-		ector ulty/ Cent	re)

FOR RESEARCH SCHOLARS

Ms	hereby	declare	that I	am	a bonafic	le regular
research student inworkingforthePh.D.DegreeofJamiaMillia Tuition and other fee vide Receipt No I further declare that I am a full time Stathe Hostel; I undertake to inform the Ho	dated _ tudent. If I take up employ	eis ment dur	ing the			deposited
		Signatu	re of Re	searcl	h Student	
Name & Signature of Supervisor Dated:	 & Seal o	Signatur of the Dep	e of HO	D/Dii	rector	
FOR F	FOREIGN/NRI STUDEN	ITS ONL	′			
(a) Name of the Applicant (with e	mail id):					
(b) Course:	Deptt/Centre: .					
(c) Nationality						
(d) Passport No(e) Embassy Name, Address & Pho	ne No					
(f) Name & Address of a person in	Delhi who can be con	tacted ir	ı case o	of em	nergency	
Email	Phone No					

Recommendation of the Foreign S	tudents' Advisor, Jami	a Millia	Islamia	a, Ne	w Delhi	
			• • • • • • • • • • • • • • • • • • • •			
	<u>Signature</u>	<u>& seal Fo</u>	<u>reign St</u>	uden	t's Adviso	<u>r</u>

PARENTS' /GUARDIAN'S* PARTICULARS

Affix a recent passport size photograph of Father/Guardian

Affix a recent passport size photograph of Mother

(a) Father's Name:	Mother's Name:
(b) Occupation:	Occupation:
(c) Office Address:	Residential Address:
Tel No:	Tel No
(d) Guardian's Name:	Office/Residential Address
e) Occupation:	Tel. No:
·	
Signature of Father/Mother	Signature of Guardian
Signature of Father/Mother	Signature of Guardian

(Any subsequent changes should be notified to the hostel authorities immediately)

^{*}In absence of both the natural parents due to demise or otherwise, person under whose guardianship the applicant has lived, brought up and got education.

Particulars of Local Guardian**

Affix a recent passport size photograph of Local Guardian I

Local Guardian-I

Tel. No

Mobile No

(d) Relation with Applicant

Signature of Local Guardian I

Affix a recent passport size photograph of Local Guardian II

Local Guardian-II

Tel. No:

Mobile No:

(d) Relation with Applicant:.....

Signature of Local Guardian II

(a) Name:	(a) Name:
b) Residential Address	(b) Residential Address
Γel. No Mobile No Email ID	Tel. No; Mobile No Email ID
(c) Office Address:	(c) Office Address:

Note: Persons residing in NCR/Delhi, under whose responsibility the applicant is seeking hostel admission are known to be local guardians. Local guardians are advised to sign the form after reading the applicant's and her parents undertakings. It is mandatory for both the Local Guardians to be present at the time of interview.

Criteria to be a Local Guardians (LG):

1. Two LGs residing at different addresses are required. 2. Both LGs must be present before the interview panel of the hostel allotment board/committee. 3. Only Married persons will be considered as an LG. 4. Husband and wife can not become LG of the one applicant.

FOR OFFICE USE ONLY

Hostel Name:		•••••
Amount deposited Rs (Rupees).		vide Bank Scroll
Hostel		Room
NoRenewal till		
Remarks (if any)		
DEALING ASSISTANT	WARDEN	PROVOST

UNDERTAKING BY THE APPLICANT

(On a Rs 10/- Stamp Paper and attached along with the application form)

I undertake that I shall abide by the following Code of Conduct:

- 1. I understand that I have been given admission in the hostel provisionally.
- 2. I understand that hostel renewal will not be granted to me if I fail to secure 55% marks in aggregate in my previous examination.
- 3. I shall not allow any unauthorized person/guest in my room.
- 4. I shall abide by the hostel Bye-laws/ rules, including rules regarding hostel timing as per Hostel Manual as amended from time to time.
- 5. I shall abide by the hostel rules to take meals in the hostel mess or as per office order.
- 6. I shall follow all the norms and practices adopted by the hostel authorities from time to time for the efficient utilization of resources.
- 7. I shall accept the present condition of hostel and room allotted to me.
- 8. I shall not indulge in any act of indiscipline during my stay in the hostel.
- 9. I shall regularly participate in all the Hostel meetings, committees and other cultural/sports activities.
- 10. I shall not degrade the hostel environment.
- 11. I shall not cause any discomfort to my fellow residents.
- 12. I shall also not indulge in any indiscipline or misconduct within the University campus during my stay in the hostel.
- 13. I shall vacate the allotted room at the end of each academic session.
- 14. I shall not keep any pets, such as cats or dogs, in the hostel room/premises, and I shall not indulge in feeding stray animals or pets in the hostel mess.
- 15. I will adhere to the designated silence hours outlined in the hostel manual, from 10 PM to 6 AM, and will refrain from participating in or organizing any activities that may disrupt this period.
- 16. The non-compliance of any of the above clauses of the Hostel code of conduct shall lead to cancellation of my hostel admission with immediate effect.
- 17. I also undertake to submit myself to the disciplinary jurisdiction of the Vice-Chancellor, Provost and other authorities of the Jamia, who may be vested with the authority to exercise discipline under the Act, the statutes, the Ordinances and the Rules that have been framed there under by the University and Hostel.

Date: Name:	Signature of Applicant
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FINANCIAL GUARANTEE AND DECLARATION BY THE APPLICANT'S PARENT/GUARDIAN

(On a Rs 10/- Stamp Paper and attached along with the application form)

Ι.	my consent and that I shall be responsible for her financial liabilities of the Hostel.
2.	I permit my ward to avail the facility of Night-out as per Hostel rules, at her own responsibility, at the address given by her, after I have conveyed my consent and awareness of the same to the Hostel Office vide my registered mobile/email.
3.	I agree that the hostel/University authorities shall have no liability towards my daughter/ward when she is outside the hostel campus. I shall not hold the hostel/University authorities responsible if my daughter/ward leaves the hostel premises without prior permission or information and also when my daughter/ward does not report for the attendance at night in the hostel. In such eventuality, the hostel authorities can at best inform me or the local guardian duly appointed by me for any further action.
4.	
	(ii) Mrs/MrS/o or D/o R/o
5.	The above mentioned Local guardians may be contacted for any official purpose or emergency that may arise during her stay in the Hostel.
6.	We agree to abide by the Hostel bye-laws that only local Guardians and Parents would be allowed for visiting on Sunday and Jamia Holidays during specified time.
7.	I hereby understand and agree that the local guardian endorsed by me shall take full responsibility of my daughter/ward in sickness or any other emergency. If they fail to do so, the hostel authorities will have the right to cancel her admission in the hostel.
8.	I have read the Hostel Rules & Regulations and I am fully aware of the Hostel Timings for various things as listed in the Hostel Manual and in the Undertaking of the Applicant.
9.	Both the above authorized Local Guardians are personally known to me and I trust them for the responsibility of local guardianship for my daughter/ward.
10	O. I hereby declare that the address and contact numbers given for both the above Local Guardians is true to the best of my knowledge and belief, and can be verified by hostel authorities.
	(Signature & Name of the Parent/Guardian)

UNDERTAKING BY LOCAL GUARDIAN * (On Rs 10/- Stamp Paper)

1. I,..... have personally known the Applicant for the last

	years; and I, have personally known and we do hereby agree to be her Local Guardians.	her for the lastyears,
2.	We undertake that we will be available as and whin case of emergency. We are willing to take her from distress or as may be required by the hostel administration cannot possibly look into the details of hospital	the hostel in times of illness and ation. We understand that the hostel
3.	We hereby declare that our respective address a admission form is true to the best of our knowl verified by hostel authorities.	
4.	We are fully aware and understand that if we fail responsibilities, the admission of our ward in the cancellation.	
5.	We have read the Hostel Rules & Regulations and we are ful various things as listed in the Hostel Manual an Applicant.	_
6.	For Local Guardians of school students: We are personally to pick the ward/applicant from the hoon leave. We are jointly responsible to ensure that when she is to go on leave.	ostel whenever she is going
	(Signature & Name of Local Guardian-I)	(Signature & Name of Local Guardian-II)

Applications without an affidavit duly signed by both the local guardians will be treated as incomplete and will be rejected.

^{*} The above information has also to be produced in the form of an affidavit by both the local guardians separately on a Rs 10/- stamp paper and attached along with the application form.

DECLARATION BY THE APPLICANT

- 1. This application is being made in full knowledge of my parents and local guardian.
- 2. I declare that my parents and guardian do/does not reside in Delhi/NCR
- 3. I hereby declare that in case I remain absent from the hostel for more than one month without intimation to the Hostel Authorities, the room allotted to me is liable to get vacated by the Hostel Authorities.
- 4. I am aware of the Hostel Rules and Regulations according to which no resident is permitted to stay after the annual examinations or after submission of M.Phil/Ph.D. thesis unless otherwise permitted by the hostel authorities. I shall inform the Hostel authorities immediately after completion of Examinations/submission of thesis/dissertation.
- 5. I declare that I am neither employed nor doing any paid job anywhere, full time or part time.
- 6. I am not an ex-student.
- 7. I have read the rules and regulations of the hostel contained in the Hostel Manual and undertake to abide by them. I shall not plead ignorance of regulations that are notified from time to time.
- 8. I vouch for the correctness of the particulars given by me in the application form. I understand that if the particulars given by me are found to be incorrect my admission will be cancelled.
- 9. I declare that I do not possess a Ration Card/ or that my name has not been included in any Ration card in the National Capital Territory (NCR).
- 10. I hereby declare that I shall be responsible for any kind of theft/ fire in my room.
- 11. I undertake to inform the authorities, in writing, of any change in any of the particulars given above as and when they occur.
- 12. I declare that the information provided in this form is correct and can be verified any time.

Signature of Applicant

Jamia Millia Islamia Hostel Administration

SELF-HEALTH DECLARATION CERTIFICATE

(To be submitted by all Hostel Residents)

Personal Details

Full Name:	Enrollment Number:
Course & Department:	Year of Study:
Hostel Name:	Room Number (if allotted):
Date of Birth:	Contact Number:
Emergency Contact Person (N	ame & Relation):
Emergency Contact Number:-	
	SELF-DECLARATION
I, the undersigned, hereby dec	lare the following in connection with my current health status:
1. I am not suffering from an other residents.	ny infectious or communicable disease that may pose a health risk to
•	physical or psychological condition that may require urgent medical n. (If any condition exists, details are provided separately along with
3. I am not under any curre treatment, details are enclosed	ent medical treatment except for minor/common ailments. (If under .)
4. 1 will immediately inform to or the onset of any illness.	the hostel authority in case of any deterioration in my health condition
5. I will comply with the he administration.	ealth and hygiene norms laid down by the university and the hostel
6. I understand that withhold action or revocation of hostel a	ing or misrepresenting health information may result in disciplinary accommodation.
	<u>UNDERTAKING</u>
-	y for the accuracy of the above information. I also authorize the measures, including medical examination and isolation, if required in
Date:	
Place:	Signature of the Resident