

THE UNIVERSITY OF AZAD JAMMU AND KASHMIR

HOSTEL ALLOTMENT FORM

Instructions

 This form should Attested copies of a. All result ca b. CNIC of study c. Domicile d. Photograph Incomplete apple During stay at host male relatives (b Female candidate w 	of the followards ent & Father ication form tel, the fema prothers, fa	ving should 2 copi r/Guard2acopi 2 copi 4 rece n shall not b le students wi ther) in the	be attach les les each les ent passp le enterta ill be allow	ort sized ained. ved to meet their emises.		Photograph
father/guardian						
Name:						
Father's Nam <u>e</u>						
Department:		Discipline:		Session:		on:
Religion	eligionCNIC#					
Phone No		Mobile #		E-mail:		
Permanent Home Ad	ldr <u>ess:</u>					
Are you an employee [of posting	yes no	if yes ple	ase indica	te official addres	s of the o	rganization and place
Have you ever lived	in hostel:	yes	no	if yes, please a	nswer	the following:
Name of the host <u>el:</u>						
Period of Sta <u>y:</u>						
Academic Record						
Examination	Year of Passing	Marks Obtained	Total	Subjects		lame of School/ ollege/University
Matriculation/O level						
F.A/F.Sc/A level or equivalent						
B.A/B.Sc/B.Com or equivalent						
BS/M.A/M.Sc/ LLB or equivalent						
Any other						

Note:

- · No candidate can claim hostel accommodation facility as a matter of right.
- · The University management reserves the right to cancel the hostel allotment at any time without assigning a re

Undertaking

I solemnly affirm and declare that:

- 1. I will follow all rules & regulations of the University of Azad Jammu & Kashmir, enforced from time to time.
- 2. I will not allow any guest to stay in my room after the sunset.
- 3. I will not allow any person to stay in my room who is involved in criminal, immoral or unlawful activities.
- 4. I will neither keep any kind of weapon with me nor allow any others to do so.
- 5. At the time of entry/exit, I will provide all required information in the entry register.
- 6. I will vacate the room and handit over the hostel management/administration before going home on vacations in case the hostel is close.

Signature of Student	Signature of Father/Guardian					
CNIC	CNIC _					
Forwarded for necessary ac	tion please.					
	Head of the Department/Instit	cute				
	FOR OFFICE USE ONLY:					
	Office of the Director Student	s' Affairs				
The hostel allotment of M	r./ <u>Ms</u> .					
CNIC #	Department of	has been approved at				
	Date of All	otment				
Hostel Warden						

Director Students' Affairs

مبلغ ۵۰روپے کےاسٹامپ بہیریر

بيان حلفي

	سيش 	کلاس	ولد	میں مسمی
ناختی کارڈ نمبر	ــــــــــــــــــــــــــــــــــــــ	کیمپی		وْ يبارشمنٹ/انسٹیٹیوٹ
ں قیام ر <u>کھنے</u>	رسٹی مظفرآ باد کے ہاسٹل میں	ہوں کہ میں آ زاد جموں وکشمیر پونیو،	حلفاً اقرار كرتا /كرتى	
			قرارکرتا/کرتی ہوں کہ:۔	كا/كى خوا ہشمند ہوں _ میں مزیدا
روانے کا/کی	جبات با قاعدگی سے جمع ک	اپنے ذمہ واجب الا دا جملہ ہاسٹل وا	ٹل میں قیام پزریہوں تب تک میں	ا۔ جب تک یو نیورسٹی ہا' پابند ہوں گا/گی۔
ا گی۔	ں ادا کرنے کا پابند ہوں گا [/]	میںا پنے ذمہ جملہ ہاسٹل واجبات مکمل	بخ سے تاسیٹ کینسل/ دست بر داری ا	۲- سيٺ الاڻمنٺ کي تارز
~	د محد لما اب ملم/ لما			
با كەمىن جملە	/طالبه حلفاً اقرار كرتا موا	والداسر برست متذكره بالاطالب علم	9	میں
	19 3	-(ىلەم ^ى ين طالب علم/ طالبە كاضامن ہول	ہاشل واجباتاداکرنے کے سلس
		شناختی کارڈنمبر:		تاريخ: