

Cost of Application: Rs. 75/-



PONDICHERY UNIVERSITY
KARAIKAL CAMPUS

APPLICATION FOR ADMISSION TO THE HOSTELS

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Application No:

1. Name of the Candidate (in block letters) :
2. Date of Birth : Age:
3. Course and Subject : Period of study:
4. i) Name of the Father/Guardian :
ii) Address :

- State :
- Pin-Code :
- iii) Occupation :
- iv) Phone No. (with STD Code)/
Mob. No :
- v) Annual Income of the Parents :
5. Mother Tongue :
6. The community to which the applicant
belongs : SC/ST/OBC/BC/PH/OC/GEN
(Copy of the Community Certificate
duly attested by a Gazetted Officer to be
produced)
7. Whether the Applicant intends
To apply for Govt. Scholarship?
Please specify :
8. Whether he/she had been in the hostel
previously in this University : Yes/No

DECLARATION

I agree to abide by the rules and regulations of the Pondicherry University Hostels as well as the periodical instructions issued by the Chief Warden. I shall pay regularly the mess and other bills before the due date. I shall not entertain any guest in my room nor will I involve myself in any unlawful activities. I agree to immediate expulsion from the hostel if I violate any of the rules and regulations of the Hostel. I shall live up to the worthy traditions of the University and Hostel.

Place: Karaikal

Date :

Name & Signature of Applicant

I guarantee the Warden of the University Hostel where my son/daughter is living regular payment of monthly mess dues and other bills of the Hostel. I also guarantee the good behavior of my ward and agree that he/she may be expelled from the Hostel if found violate the rules & regulations of the Hostel.

**Signature of Parent/ Guardian
Address:**

Date:

Certified that the applicant is a student of _____ programme of Department of _____. I recommend that he/she may be given admission to the Hostel. I shall insist on a no-due certificate from the Warden of the Hostel before the candidate is allowed to appear for the end semester examination/submission of the Ph.D. thesis.

Date:

Signature of Head of the Department with the stamp

FOR OFFICE USE

1. Room rent for SC/ST Boy students : Exempted
2. Room rent for Girl students : Exempted
3. Room rent for PG : Rs.900/- p.a. Challan No. Date:
4. Room rent for Ph.D. Scholar : Rs.1800/-p.a. Challan No. Date:
5. Hostel Estt. Charges : Rs.300/- p.a. Challan No. Date:
6. Hostel Caution Deposit : Rs.3000/-p.a. Challan No. Date:
7. General Amenities Fund : Rs.700/- p.a Challan No. Date:
8. Mess Charges : Rs. Challan No. Date:

Date of Admission: Name of the Hostel: Room No.

Office Manager/Section Officer

Warden

Chief Warden

Note:

1. Allotment of room/seats in the hostel is confirmed and the student can take possession of the room/seat only on production of payment receipts to the Office Manager/Section Officers.
2. The residents are also requested to open an account in any of the Nationalized Banks in Karaikal preferably in Indian Bank, Karaikal Branch, as payment from the University/Hostel will be made only by means of crossed cheques.
3. The inmates are requested to refer to Hostel Notice Board frequently for changes and modifications if any, to the hostel rules.



PONDICHERY UNIVERSITY
UNIVERSITY HOSTELS OFFICE
KARAIKAL CAMPUS

Undertaking

I, _____, son/daughter of _____
permanently residing at _____
solemnly assure the Pondicherry University authorities that

- a. I shall abide by all the rules and regulations pertaining to the hostels which are in force from time to time.
- b. I also know that mess is compulsory for all hostellers. I shall pay the mess bill to the concerned official in two installments in a year – July and January. In case delayed payment, I shall clear the mess dues with appropriate fine.

Date:

Place:

Name & Signature of the Student

I, _____, parent/guardian of Shri/Ms. _____ undertake the responsibility of my ward obeying the rules and regulations to the hostels. I know very well that he/she can be punished and even expelled from the hostel/the University by the University authorities, if he/she does not obey the rules and regulations of the hostels.

Date:

Name & Signature of the parent/guardian

Place:

Address: