FORM 5 B



JAWAHARLAL NEHRU UNIVERSITY OFFICE OF THE DEAN OF STUDENTS

Inter-Hall Administration

APPLICATION FOR MARRIED RESEARCH STUDENTS ACCOMMODATION IN SUBANSIR HOSTEL

	Registration No. :		-12						
3. I	Date of Birth :		Gende	er	Nationality _				
4. 5	School & Center:			- tolk contraction	Subject Co	ode		, , , , , , , , , , , , , , , , , , ,	
5. I	Programme of Study:					1656	, 1101		
7. I	Permanent Address* :								
8. I	Present Address				viodile ivo			!	
_	Email IDMobile No								
10. E	Details of fellowship availed Name of the Funding		vailing Type of	Period From-	Amount pe	er I	ii.a.j	per	Remark
. 94	Agency		Fellowship	То	Month		Month		- Carrett No
f.						SIP S		3 (%). 3 (6)	
	The state of the s								
ouse									
	Details of employment ava Name of the employer/ Self- employer	De	availing signation/ ture of work	Period From- To	Salary/Inco	ome	100	RA per	Rema
	Name of the employer/ Self-	De	signation/			ome	100		Remai
11. E	Name of the employer/ Self-	De	signation/			ome	100		Remai
f ouse	Name of the employer/ Self-employer	Des	signation/ ture of work	From- To	per Month	ome	100		Remai
f ouse	Name of the employer/ Self-	Des	signation/ ture of work	From- To	per Month	ome	100	onth	
f ouse	Name of the employer/ Self-employer	Des	signation/ ture of work	From- To	per Month	ome	100		
f ouse	Name of the employer/ Self-employer	Des	signation/ ture of work	lostel, give the e	per Month	ome	100	onth	

DECLARATION

Caretaker _____

I hereby declare that the information given above is true to the best of my knowledge and belief and nothing has been concealed. In case it is found at any stage later that any information given is incorrect and /or some material facts have been concealed. I am liable of immediate eviction from the hostel besides such other actions which the University may deem fit to take against me.

I undertake to abide all rules and regulations governing the allotment and instructions brought from time to time regarding stay in the hostel.

regard will be entertained.

I understand that the allotted room is not occupied with family within the stipulated period my claim for the hostel will be forfeited. The allotment letter will be send only to the Mailing address mentioned and no complaints in this The allotment will be only to the applicant and no transfer will be allowed in the spouse name Full Signature of the Applicant Date ___ Documents to be attached:-Admission folio and the Registration folio of the current semester Documentary proof of Permanent address of both self and spouse----Voter ID/Passport/Domicile Certificate from a revenue officer not below the rank of the Tahasildar (two out of the three). The priority criteria for allotment of other hostels will also be applicable for MRSH Marriage Registration certificate issued by the competent authority and an attested post card size photograph of husband and wife together. A family photo and birth certificates of children whose names mentioned in the Family Members staying with Passport and visa copies of the applicant and/or the spouse who are foreign national. Those who are on study leave will have to submit a certificate in this regard from the employer with salary and HRA status. FOR IHA USE _2016-2019 Date of Receipt of Application ______No-MRSH/ _____ 1. Date of the offer _____ Date of acceptance _____ 2. Date of allotment _____ Room No. ____ Category on _____ 3. Date of acceptance _____ Allotted Room No. _____ 4. Paid Fee of ₹ ______ Vide Receipt No. _____ Date ____ Office-In-Charge/Caretaker _____Senior Warden____ Hostel Vacated on _____ Cleared all dues vide receipt No. _____ Date. ____

Cahier _____