

Sr. No. ....

Ph. : 01892-265002



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Mehar Chand Mahajan  
**Dayanand Anglo Vedic College, Kangra (H.P.)**  
**HOSTEL ADMISSION FORM**  
**Session 2020-21**  
*(Particulars of the Candidate)*

Affix your recent  
Photograph  
With Gum

(For Old Resident Scholar)  
Name previous Class.....  
Previous Hostel.....  
Previous Roll No.....  
Session.....

(For Office Use)  
College Roll No.....  
Class.....Room No.....  
Hostel.....  
Amount Received.....  
Receipt No.....Dated.....

- Name  
(in Block letters)
- Father's Name  
(in Block Letters)
- Date of Birth
- Guardian's Name and relation.....  
(If Father deceased)
- Father's/Guardian's Occupation.....
- Annual Income.....
- Permanent Address.....STD Code  
Email Address..... Phone No.
- Local Acquaintance, if any.....Phone No.....
- Do you have some serious ailment or did you ever have it?  
(provide detailed information including treatment).....
- Previous Academic Record.

Session	Exam	Roll No.	Board/University	Result	Marks %	Name of the Institution last attended

Father's/Guardian's Signature

Student's Signature

Dated.....

Warden's Report/Recommended  
(For those who were boarders last year)

Orders

Principal

## DECLARATION

1. I shall abide by all hostel rules and regulations.
2. I shall be responsible for the movable and immovable property of the Hostel.
3. I shall not keep any guest in my room.
4. I shall not stay out for the night without the prior permission of the warden.
5. I shall not leave station without prior permission of the warden.
6. I shall clear mess and other dues by the 10th of every month.
7. I shall not keep any electric appliance, valuable or hard cash in my room.
8. I shall not smoke in the Hostel premises, nor shall allow any visitor to do so.
9. I shall attend all hostel functions, meetings and havans.
10. I shall not bring any vehicle to the hostel premises.
11. If I violate any college or Hostel rule, I may be expelled.

Date.....

Signature of the Student

### FATHER'S/LEGAL GUARDIAN'S DECLARATION

I .....Father/Legal Guardian of..... undertake the responsibility for the conduct of my son/daughter/ward during his/her stay in the Hostel. The authorities may even expel him/her from the hostel & college if he/she does not abide by the rules. I also take the responsibility of paying all college & hostel dues by the 10th of every month. In the interest of my son/daughter/ward. I shall keep in touch with the warden and teacher and I undertake to present myself in person as and when called for. My ward is not suffering from any disease which requires constant medical attention and constant medication.

#### **NAME OF PERSONS AUTHORISED TO SEE THE BOARDER BESIDES MOTHER AND FATHER**

S.No.	Name	Address	Relation with Boarder
1.			
2.			

**1st Visitor**



**Signature of Father/Legal Guardian**

Address .....

Name.....

Address.....

Phone Number.....

Signature

**2nd Visitor**



Name.....

Address.....

Phone Number.....

Signature