## SHRI RAM COLLEGE OF COMMERCE BOYS HOSTEL

| Fo Hostel Enr Room No. | FOR OFFICE USE For Warden FORM A NEW ADMISSION Hostel Enrol. No. SESSION: 2017-18 Room No. Dated |   |                                 | JCANTS<br>OGRAPH      |        |                 |
|------------------------|--|---|---------------------------------|-----------------------|--------|-----------------|
|                        | 1  | Admission Category:   |                                 |                       |        |                 |
|                        | NCOMPLETE :<br>PLEASE DO   | LL DETAILS TO BE G<br>FORM IN ANY RESP<br>O NOT GIVE ANY FA | ECT WILL BE SU<br>LSE/ MISLEADI | UMMARILY<br>NG INFORM | IATION |                 |
|                        |  | Section   |                                 |                       |        |                 |
|                        |  |   |                                 |                       |        |                 |
| 5. School              | D D  xam. (Qualifying)  / College  | ) MM Y Y  |                                 |                       |        |                 |
| S. No.                 | Main Subject   |   | Max. Marks                      | Marks Obta            | ained  | Percentage      |
| i.                     |  |   |                                 |                       |        |                 |
| ii<br>iii              |  |   |                                 |                       |        |                 |
| iv                     |  |   |                                 |                       |        |                 |
| 1V                     | Total  |   |                                 |                       |        |                 |
|                        | Other Subjects,  | If any  |                                 |                       |        |                 |
| v                      | ,  |   |                                 |                       |        |                 |
| vi                     |  |   |                                 |                       |        |                 |
| vii                    |  |   |                                 |                       |        |                 |
|                        |  |   |                                 |                       |        |                 |
| 7. (A) Fath            | er's Name  |   |                                 |                       |        |                 |
| Occupat                | ion  |   | Tel. No                         | •••••                 |        |                 |
| Office Address         |  |   | Designation                     |                       |        | ARENT'S         |
| E-mail                 |  |   |                                 |                       | PA     | ASSPORT         |
| Income                 | (Per month)  |   |                                 |                       | PHO    | SIZE<br>TOGRAPH |
|                        |  |   |                                 |                       |        |                 |
| Occupation             |  |   | Tel. No                         |                       |        |                 |

|     | Office Address   | Designation .   |                               |  |  |  |  |
|-----|--|---|-------------------------------|--|--|--|--|
|     | E-mail   |   | 7)                            |  |  |  |  |
|     | Income (Per month)   |   |                               |  |  |  |  |
| 8.  | 3. Residential Address, if different from above (6)  |   |                               |  |  |  |  |
|     | (Please attach photocopy of Ration Card or some documentary proof of present residence)                          |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
| 0   | -  | 11 ' ' TZ \   |                               |  |  |  |  |
| 9.  |  | elhi (in Kms.)  |                               |  |  |  |  |
| 10. |  | Amplicant   |                               |  |  |  |  |
|     | *  | Applicant   |                               |  |  |  |  |
|     | _  |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
|     |  | Residen   |                               |  |  |  |  |
|     | •  |   |                               |  |  |  |  |
|     |  | hat I have read the Hostel Prospectus and unders      | • /                           |  |  |  |  |
|     |  | tions mentioned therein. I undertake to abide by a    |                               |  |  |  |  |
|     |  | ignorance of any future regulations that may be i     | <u> </u>                      |  |  |  |  |
|     | •  | es or breach of code of conduct by me will be trea    |                               |  |  |  |  |
|     | in my expulsion from the Hosto   | ·   | , ,                           |  |  |  |  |
|     | I undertake to vacate the Hoste  | el accommodation provided to me within two days       | s after the completion of the |  |  |  |  |
|     | last paper of University Exami   | ination. In the event of default in this respect I wo | ould render myself liable for |  |  |  |  |
|     | any penal action that the author   | rities may deem fit. I shall not keep any kind of ve  | hicle in the Hostel.          |  |  |  |  |
|     | I also undertake that I would  | d not harbour and entertain any guest in my           | room. Any breach of this      |  |  |  |  |
|     | undertaking would attract stringent action which may include expulsion from the Hostel.                          |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
|     | Counter Signature of Parent  | Counter Signature of the Local Guardian               | Signature of the Applicant    |  |  |  |  |
|     | _  |   |                               |  |  |  |  |
|     | Date   |   |                               |  |  |  |  |
|     | (Local guardian and/ or parent is/ are required to accompany his/ their ward at the time of Admission to Hostel) |   |                               |  |  |  |  |
|     | FOR OFFICE USE ONLY  |   |                               |  |  |  |  |
|     |  |   |                               |  |  |  |  |
|     | Recommended for<br>Admission   | Admitted  | Receipt No                    |  |  |  |  |
|     | Tamission .  |   | Date                          |  |  |  |  |
|     | Warden   | Principal   | Amount Rs                     |  |  |  |  |
|     |  |   | Cashier                       |  |  |  |  |
|     | Date   | Date  | Date                          |  |  |  |  |
|     |  |   |                               |  |  |  |  |

### SHRI RAM COLLEGE OF COMMERCE BOYS HOSTEL

| RE- ADMISSION    |                        |
|------------------|------------------------|
| Hostel Enrol. No | APPLICANT'S PHOTOGRAPH |

| 1           | ALL DET                  | AILS TO BE GIVE<br>IN ANY RESPECT |                                       |                 | JECT     | TED        |
|-------------|--------------------------|-----------------------------------|---------------------------------------|-----------------|----------|------------|
| 1. A. Namo  | e                        |                                   |                                       | . Date of Birth |          |            |
| Class       |                          | Roll No                           | Sect                                  | ion             |          |            |
| E-mai       | 1                        |                                   | Mobile (i                             | f any)          |          |            |
| Signa       | ture                     |                                   |                                       | Γ               |          |            |
| 2. A. (i) F | ather's Name             |                                   |                                       |                 | PA       | RENT'S     |
| 1           | Mobile                   | E-mail                            | E-mail                                |                 | PASSPORT |            |
| (ii) N      | Mother's Name            |                                   |                                       |                 |          | SIZE       |
| 1           | Mobile                   | E-mail                            |                                       |                 | PHO      | TOGRAPH    |
| B. Resid    | lential Address          |                                   |                                       |                 |          |            |
|             |                          |                                   |                                       |                 |          |            |
|             | e: Office                |                                   |                                       |                 |          |            |
|             | e of Local Guardian      |                                   |                                       |                 |          |            |
|             | gnation                  |                                   |                                       |                 |          |            |
|             | e Address                |                                   |                                       |                 |          |            |
|             | ion with the Applicant   |                                   |                                       |                 |          |            |
|             | lential Address          |                                   |                                       |                 |          |            |
| F. Phone    | e: Office                |                                   |                                       |                 |          |            |
| 4 I 4 E     |                          | ny change in address, i           |                                       | •               |          |            |
|             | am. (Qualifying) Passed. |                                   | · · · · · · · · · · · · · · · · · · · | 1               |          |            |
| S. No.      | Main Subject             |                                   | Max. Marks                            | Marks Obtain    | ned      | Percentage |
| i.          |                          |                                   |                                       |                 |          |            |
| ii          |                          |                                   |                                       |                 |          |            |
| iii         |                          |                                   |                                       |                 |          |            |
| iv          |                          |                                   |                                       |                 |          |            |
| V           |                          |                                   |                                       |                 |          |            |
| vi          |                          |                                   |                                       |                 |          |            |
| vii         |                          |                                   |                                       |                 |          |            |
| Viii        |                          |                                   |                                       |                 |          |            |

|   | r Out of  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| IInd Year / Seme  | ster Out of   |  |  |  |  |  |  |
| 6. In case of sports quota: Details of performance in Sports  |   |  |  |  |  |  |  |
| DECLARATION: I declare that etter and spirit of Rules and Regulations of the Hostel. I shalt ime to time. I know that any violand may result in my expulsion from undertake to vacate the Hostel at ast paper of University Examinating penal action that the authoriticalso undertake that I would not | t I have read the Hostel Prospectus and egulations mentioned therein. I underta I not plead ignorance of any future regulation of rules or breach of code of conductom the Hostel.  accommodation provided to me within two tion. In the event of default in this respectes may deem fit. I shall not keep any kind harbor and entertain any guest in my rooch may include expulsion from the Hostel. | understood the provisions in their ke to abide by all the Rules and lations that may be notified from act by me will be treated seriously to days after the completion of the ct I would render myself liable for d of vehicle in the Hostel.  m. Any breach of this undertaking |  |  |  |  |  |
| Signature of Parent and Local (   | Guardian  | Signature of the Applicant   |  |  |  |  |  |
|   | Guardian  | Signature of the Applicant   |  |  |  |  |  |
| Signature of Parent and Local (   | Guardian<br>FOR OFFICE USE ONLY   | Signature of the Applicant   |  |  |  |  |  |
|   |   | Signature of the Applicant   |  |  |  |  |  |
|   |   | Receipt No.  |  |  |  |  |  |
| Date  | FOR OFFICE USE ONLY   |  |  |  |  |  |  |

# SHRI RAM COLLEGE OF COMMERCE BOYS HOSTEL SHRI RAM COLLEGE OF COMMERCE UNIVERSITY OF DELHI

#### FORM B

#### ALL ENTRIES ARE TO BE MADE IN BLOCK LETTERS

**SESSION: 2017 2018** 

#### **DECLARATION**

I declare that I have read the **Hostel Prospectus** and understood the provisions in their letter and spirit of **Rules and Regulations** mentioned therein. I undertake to abide by all the Rules and Regulations of the Hostel. I shall not plead ignorance of any future regulations that may be notified from time to time. I know that any violation of rules or breach of code of conduct by me will be treated seriously and may result in my expulsion from the Hostel.

| 1. A. | Name of Student                           |   |
|-------|---|---|
| В.    | Signature                                 |   |
| C.    | Date                                      |   |
| 2. A. | Name of Parent                            |   |
| В.    | Residential Address                       |   |
| C.    | Phone: Office Residence                   | Mobile                                    |
| D.    | Signature                                 |   |
| E.    | Date                                      |   |
|       |   |   |
|       |   |   |
|       | ADMISSION SO                              | CHEDULE                                   |
| 1. La | ast date for receiving New Admission Form | : Saturday, 8th July, 2017 (by 1.00 p.m.) |
| 2. Pu | ablication of List of Selected Applicants | : Wednesday, 12 <sup>th</sup> July, 2017  |
|       | ong with waiting List on the Notice Board | (by 5.00 p.m.)                            |
|       | on College Website                        |   |

3. Fee Deposit : Friday & Saturday, 14th & 15th July,

2017 (9.00 a.m. to 3.00 p.m.)

4. Allotment of Rooms : Monday 17th July, 2017

5. Publication of Second List of Selected : Tuesday, 18th July, 2017

Application along with waiting list on the (by 5.00 p.m.)

Notice Board and on College Website

(if Required)

6.Fee Deposit (Second List) and allotment : Thursday 20<sup>th</sup> July, 2017

of room (if required) (9.00 a.m. to 3.00 p.m.)

| 3. A.    | I  |   |  |  |  |  |
|----------|--|---|--|--|--|--|
|          | undertake to take charge of my   | ward in case of any                       |  |  |  |  |
| illness, | illness, misbehavior or misconduct, as well as emergency. I further undertake to pay all dues within the |   |  |  |  |  |
| stipula  | ted period on behalf of my ward as and when communicated by the Hostel author                            | rities.                                   |  |  |  |  |
| B.       | Relationship with ward   | · · · · · · · · · · · · · · · · · · ·     |  |  |  |  |
| C.       | Name   |   |  |  |  |  |
| D.       | Office Address with Designation  |   |  |  |  |  |
|          |  |   |  |  |  |  |
| E.       | Residential Address  |   |  |  |  |  |
| F.       | Phone: Office Residence Mobile   |   |  |  |  |  |
| G.       | Signature  |   |  |  |  |  |
| H.       | Date   | LOCAL GUARDIAN'S PASSPORT SIZE PHOTOGRAPH |  |  |  |  |
|          | ACKNOWLEDGEMENT  |   |  |  |  |  |
|          | (To be filled in by the applicant)   |   |  |  |  |  |
|          |  |   |  |  |  |  |
| Sl. No.  | :  |   |  |  |  |  |
| Name .   |  |   |  |  |  |  |
| Class    |  |   |  |  |  |  |
| Eligibi  | lity Category  |   |  |  |  |  |

Please Check Notice Board and College Website for Date and time of Admission.

Hostel Assistant The SRCC Hostel, Delhi-110007

## SHRI RAM COLLEGE OF COMMERCE BOYS HOSTEL, UNIVERSITY OF DELHI, DELHI FORM C

Give details of Five Close Relatives who could be referred in case of emergency and for verification:

| Dat |  |   |
|-----|--|---|
|     | nereby undertake that I shall not keep any kind of<br>und guilty I shall surrender my rights to stay in th | <u>-</u>                                  |
|     | UNDERT   | AKING                                     |
| Pla | ace:   | Signature of Student                      |
| Dat | undertake that information furnished above is ate:   | u ue to the best of my knowledge & benef. |
| Ι   |  | true to the best of my knowledge & belief |
|     |  |   |
|     |  |   |
|     |  |   |
|     | Postal address   |   |
| J.  |  | Profession                                |
| 5.  |  | Profession                                |
|     |  |   |
|     |  |   |
|     |  |   |
|     | •  |   |
| т.  |  | FIOIESSIOII                               |
| 4.  |  | Profession                                |
|     |  |   |
|     |  |   |
|     |  |   |
|     | •  |   |
| ٥.  |  | Trotession                                |
| 3.  |  | Profession                                |
|     |  |   |
|     |  |   |
|     |  |   |
|     | •  |   |
| ۷.  |  | Profession                                |
| 2.  |  | Drafaccion                                |
|     |  |   |
|     |  |   |
|     |  |   |
|     | •  |   |
|     |  |   |

Place:

**Signature of Student** 

## **ANNEXURE III**

| I,                  | (Parents Name)  | S/o_                  |                 | Father/ Mother of      |
|---------------------|---|-----------------------|-----------------|------------------------|
|                     | Student Name  | R/o _                 |                 | do                     |
| hereby solemnly     | declare as under:   |                       |                 |                        |
| 1. I have no hou    | ise in my name or in the name of                                  | of my family member   | s in the NCT of | Delhi, Faridabad,      |
| Gautam Budha N      | agar (NOIDA), Gurgaon, Ghaz                                       | iabad, Sonipat, Bahad | lurgarh & Bagh  | pat.                   |
| 2. I am not resid   | ling in NCT Delhi, Faridabad,                                     | Gautam Budha Nagar    | (NOIDA), Gur    | gaon, Ghaziabad,       |
| Sonipat, Bahadur    | garh & Baghpat.   |                       |                 |                        |
| 3. I do not have    | a job assignment in NCT of Do                                     | elhi.                 |                 |                        |
|                     | provided by me proves to be wassion of my ward. I will have n     |                       | hostel manager  | ment may cancel the    |
| VERIFICATIO         | )N  |                       |                 |                        |
| Verified that the a | aforesaid contents are true and of false and nothing has been con |                       | •               | and belief. No part of |
| Verified at         | on the  | is of                 |                 | ,·                     |
|                     | (Place)   | (day)                 |                 |                        |

**DEPONENT**