



SHAHEED SUKHDEV COLLEGE OF BUSINESS STUDIES

FOR OFFICE USE

Hostel Enroll. No.

Room No.

Dated

HOSTEL FORM A NEW ADMISSION SESSION: 2025-26

APPLICANTS
POTOGRAPH

Admission Category:

ALL DETAILS TO BE GIVEN IN BLOCK LETTERS. INCOMPLETE FORM IN ANY RESPECT WILL BE SUMMARILY REJECTED. PLEASE DO NOT GIVE ANY FALSE/ MISLEADING INFORMATION. HOSTEL SEAT AQUIRED ON THE BAISIS OF FALSE INFORMATION WILL BE IMMDDIATELY CANCELLED AND THE FEE DESPOSITED WILL BE CONFISCATED.

1. Student Name
2. Class Section Roll No.
3. Assigned E-mailMobile (if any)
4. Date of Birth (DD/MM/YY):

5. Permanent Address
.....

6. (A) Father's Name
OccupationTel. No.
Office Address Designation
E-mail Mobile (if any)
Income (Per month)
(B) Mother's Name
OccupationTel. No.

PARENT'S
PASSPORT
SIZE
PHOTOGRAPH

Office AddressDesignation
E-mail Mobile (if any)
Income (per-month)

7. Residential Address, if different from above

(Please attach photocopy of Ration Card or some documentary proof of present residence)

.....

Telephone

8. Distance from college (in Kms.)

9. Local Guardian's Name

Relationship with the Applicant

Designation

Address (Office)

Address (Residence)

Telephone: OfficeResidence

E-mail Mobile (If any)

DECLARATION: I declare that I have read the Hostel Prospectus and understood the provisions in 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.

I undertake to vacate the Hostel accommodation provided to me within two days after the completion of the last paper of University Examination. In the event of default in this respect I would render myself liable for any penal action that the authorities may deem fit. I shall not keep any kind of vehicle in the Hostel.

I also undertake that I would not harbor 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

FOR OFFICE USE ONLY

Recommended for Admission
Warden
Date

Admitted
Principal
Date

Receipt No.
Date
Amount Rs.
Cashier
Date

FORM B

ALL ENTRIES ARE TO BE MADE IN BLOCK LETTERS

SESSION: 2025 – 2026

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. Name of Student.....

Signature.....

Date.....

2. Name of the Parent.....

Residential Address.....

Phone: Office..... Residence..... Mobile.....

Signature.....

Date.....

3. A. I.....the Local Guardian of
..... undertake to take charge of my ward in case of any
illness, misbehavior or misconduct, as well as emergency. I further undertake to pay all dues within the
stipulated period on behalf of my ward as and when communicated by the Hostel authorities.

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

Eligibility Category

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

Account Details of the Student/Parents (In case the student do not have an account)

Account Holder Name:- _____

Account Number:- _____

IFSC Code:- _____

I undertake that information furnished above is true to the best of my knowledge & belief.

Date:

Place:

Signature of Student

**Hostel Assistant
The SSCBS Hostel
Delhi-110089**

**SHAHEED SUKHDEV COLLEGE OF BUSINESS STUDIES
UNIVERSITY OF DELHI**

FORM-C

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

1. Name of the Relative: Profession
Relationship with self
Postal address
E-mail.
Mobile No.
Phone with STD Code.

2. Name of the Relative: Profession
Relationship with self
Postal address
E-mail.
Mobile No.
Phone with STD Code.

I undertake that information furnished above is true to the best of my knowledge & belief.

Date:

Place:

Signature of Student

UNDERTAKING

I hereby undertake that I shall not keep any kind of vehicle in and around hostel premises. In case found guilty I shall surrender my rights to stay in the hostel.

Date:

Place:

Signature of Student

**SHAHEED SUKHDEV COLLEGE OF BUSINESS
STUDIES (UNIVERSITY OF DELHI)
ROHINI DELHI 110089**

UNDERTAKING

I _____ S/D of
Mr./Ms. _____

College Roll No. _____ Course _____ hereby join the
hostel and abide by the rules and regulations made by the college authorities from time to
time failing which my admission to the hostel may be cancelled.

I agree to pay hostel fee as decided by the college authorities (which may be revised from
time to time) and will necessarily avail the mess facility.

I take the responsibility of all the items (Bed, Mattress, Table, Bathroom fittings, Air
Conditioner and Almira) handed over to me and return the same in good condition when I
vacate the hostel. If I fail in this regard I agree to pay the fine (as proposed by hostel
authority) and the replaceable cost of any other fittings as decided by the college authorities.

I shall take the personal responsibility to behave properly with all the co occupants of the
Hostel. If I fail in the regard my admission to the Hostel to be cancelled.

I have taken admission by producing the genuine certificate with regard to my residence and
category. If any discrepancy is found in this regard my admission to the hostel may be
cancelled.

(Student's Signature with date)

(Parent's Signature with date)