D.S. KOTHARI HOSTEL UNIVERSITY OF DELHI, DELHI-110007

No											
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RE-APPLICATION FORM (2025-26)

(All entries are to be filled in ink and block letters. Incomplete or unsigned applications will be rejected.)

Name

Course	=
Year	Passport size Photograph duly attested by the
Subject	Hood of the Department /
Last Examination Passed (with Course)	
Semester I/III /V	
Semester II/IV /	
College/Department	
Reserved Category (if any)	
FOR OFFICE US	SE ONLY
Date of Interaction with	
Hostel Authorities	Date Application received by
	Application: Complete / Incomplete
Remarks	List of Enclosures (Self attested copies)
	Receipt of Hostel Registration Fee.
Resident Tutor:	2. Receipt of Admission Fee/ Latest Fee.
resident fator.	CUET 2023 Scorecard issued by NTA (for entrance based admission)
	Certificate of Reserved Category, if applicable.
	5. Domicile Certificate/ Aadhaar/ Voter ID/ any other
	valid proof of domicile/ permanent address.
	6. Local guardian-cum-financial guarantor's address proof
Warden:	(attested by them).
	7. Class X Marksheet.
	Certificates of Qualifying Degree/ Last Examination Passed.
	9. For PhD applicants: DRC/BRS Letter and Course-work
Provost:	result, if completed.
1101051.	10. For Foreign applicants: Medical Certificate from NICD.
	Date of Admission Room allotted
	2 and of 1 animonomium in Norm unoted

Dealing Asstt.

PARTICULARS OF THE APPLICANT Name (in Block Letters) E-mail ID:-.....Mobile No..... Permanent Address.Pin Code..... Mother's Name......Occupation of Mother.... Mother's Office Address.... Mother's Residence Address.... Father's Name.....Occupation of Father.... Father's office address. Father's residence address. (Any subsequent change must be immediately communicated in writing to the hostel office.) ACADEMIC RECORD Exam. Passed University Year Subject (s) **Aggregate Marks** Percentage Obtained Maximum BA/BSc/B.Lib/B.Com Pass/Hons./Other..... M.A./M.Sc./M.Lib./. MCA/MHROD/MIB M.Com./LL.B/LL.M/ B.Ed./M.Ed/Other..... M.Phil. Any other (a) Course and Year of study to which the applicant is admitted in the University of Delhi (e.g.: MA/MSc Previous/Final; LL.B. I/II/III year; Ph.D. I/II/III/IV year)..... (b) Subject...... Duration of Course (c) Date of Admission/Registration (e) Department/Centre..... Faculty(g) Campus Details of the Scholarship/Fellowship Awarded, if any

Do you belong to SC/ST/PwBD/ CWAP/Sports category?

Are you a foreign national?

(If yes, attach self attested copy of passport/ relevant certificates)

(If yes, attach self attested copy of relevant certificates)

Are you currently employed (temp	orary/guest/adhoc/permanent)? YES / NO
	of the Employer
	e/guest resident in any postgraduate hostel of the University of Delhi?
	s, duration of such stay
Any other information the applica	ant may like to give
	, hereby declare that all the information submitted by me in the and valid. I will present the supporting documents as and when required.
Date	Signature of the Applicant
DECLA	RATION TO BE SIGNED BY Ph.D. APPLICANTS
	, hereby declare that I am a bonafide regular Ph.D. scholar in (Department/Centre), under(Faculty).
I,(am exer	mpted/ pursuing/ have completed) Course-work of the Ph.D. program.
The date of registration of Ph.D. pr	rogram is
	time bonafide Ph.D. scholar. If I take up employment during the tenure of my e to inform the hostel administration about it immediately.
	Signature of the Applicant
Name and Signature of the Research Supervisor(s)	Name and Signature of the Head of the Department/ Dean of the Faculty with stamp
DECLARATIO	ON TO BE SIGNED BY POSTGRADUATE APPLICANTS
CERTICATE TO BE SIGNED	D BY THE HEAD OF THE DEPARTMENT/PRINCIPAL OF COLLEGE CONCERNED
program of the College/Departme	is a bonafide, full time student of
	tted on the basis of(entrance examination/ merit) / position in Admission List*** is at serial no
Date	
*** Not Applicable for II/III year st	udents.

Name and Signature of the Head of the Department/Centre /Principal of the College with stamp

DECLARATION BY THE APPLICANT'S LOCAL GUARDIAN-CUM-FINANCIAL GUARANTOR

I certify that the applicant is seeking admission with my consent and that I shall be responsible for his financial liabilities, his conduct in the hostel and to look after him in case of emergency.

Signature of Local guardian-cum-financial guarantor*

*Name of Local guardian-cum-financial guarantor
Relationship to candidate
Residential address
Office Address
Mobile Number
Note: Copy of local guardian-cum-financial guarantor's (residing in Delhi-NCR) voter card/ aadhaar card / electricity
bill/bank pass-book/any other valid address proof, attested by the local guardian-cum-financial guarantor, must be

UNDERTAKING FOR DURATION OF STAY

- 1. I understand that the total duration of my stay as a bonafide resident in any postgraduate hostel(s) shall not exceed six years.
- 2. I understand that I shall be eligible to stay in the hostel for the duration of my course as in the cases given below:

	Course		Years	Special Note
(a)	B.Lib./ M.LIb	:	1/2	(or statutory duration of the Course)
(b)	M.A./M.B.A./M.Sc./ M.Com./ LL.M2 year	·/		
	B.Ed/M.Ed/MHROD/MIB/MCA/MJ	:	2	"
(c)	LL.B./BA(H)(Humanites and Social Science)):	3	"
(d)	B.Tech/.	:	4	"
(e)	Integrated Law Courses	:	5	"
(f)	Ph.D**	:	6	"

^{**} Duration of stay shall be counted from the date of admission to the course

- 3. I shall vacate my room in the Hostel after completing my
 - (a) Final year Annual/Semester Regular Examination

OR

(b) After submitting my Ph.D. Thesis

attached with the application form.

- 4. I undertake to vacate my room in the Hostel at the end of the statutory period of the Course or at the end of six years in the University PG Hostel(s), whichever falls earlier.
- 5. I understand that the residents in the final years/semesters of M.A./M.Sc./M.Com/ LL.B./LL.M./B.Lib/M.B.A./ M.C.A./M.Lib/ MHROD/MIB/B.Ed/M.Ed/ B.Tech/MJ are required to vacate the room by 31st May or within seven days of their Annual/Semester Examination of the University of Delhi in the concerned subject and course, whichever is earlier.
- 6. I understand that a resident of Ph. D course is required to submit a certificate from the Head of the Department and the Supervisor every six months that he is actively engaged (full-time) in research and his work is satisfactory, failing which his residency in the Hostel will be terminated.

Date:	Signature of the Applicant

FOR FOREIGN STUDENTS ONLY

(i) I	Passport No.:
(iii)	Recommendation of the Foreign Students Advisor, University of Delhi.
	(Signature with official seal/stamp)
(iv)	Recommendation of the concerned Embassy: Name of the recommending authority Designation
	(Signature with official seal/stamp)
Nati 14-6	ddition to the above recommendations, foreign students are also required to produce a Medical Certificate from the onal Institute of Communicable Diseases (NICD), 22 Sham Nath Marg, Delhi-110054 as per the terms of letter No. F86-ES II of 20th April 1987 from the Ministry of Human Resource Development, Department of Education, ternment of India, New Delhi.
	DECLARATION BY THE CANDIDATE
1. 2. 3. 4.	This application is being made in full knowledge of my parents and local guardian. I vouch for the correctness of the particulars given by me in the application form. I understand that if the particulars given by me are found to be incorrect, my admission shall stand cancelled. I declare that my parents do not reside in Delhi-NCR. I declare that I am not an ex-student/drop-out in the course that I am currently enrolled in.
5.	I declare that I am neither employed nor am I doing any paid job anywhere, full time or part time. If I take up employment, I shall inform the hostel administration immediately.
6. 7.	I declare that in case I absent myself from the hostel for more than one month without intimation to the hostel administration, the room allotted to me is liable to get vacated by the hostel administration. I understand that the hostel administration or its delegates of the hostel have the authority to enter my room and to make a surprise check of the room as and when considered necessary by them.
8.	I understand that all hostel and mess dues are payable in advance by the 15th day of each month without late fine. I also understand that in case my outstanding hostel/mess dues at any time exceed two months, my room (if single-seated) would be double-locked and in case of double-seated room, my belongings would be taken into custody by the hostel till such time that the outstanding dues are cleared by me.
9.	I understand that I cannot change the room allotted to me in the hostel without written permission of the hostel administration. I undertake to leave all the furniture items and fixtures intact in the room from which I shift and also in the room in which I shall be staying at the time of my leaving the hostel. I understand that I am liable to be charged for loss or breakage of any hostel furniture or fixture as per decision of the hostel administration.
10. 11.	The hostel infrastructure is known to me and I shall not ask for any additional facility other then the existing one. I have read the rule and regulations of the hostel in the 'Handbook of Information' and undertake to abide by them. I shall not plead ignorance of the regulations/notifications/rules/notices that may be notified from time to time.
12.	I also undertake to submit myself to the disciplinary jurisdiction of the Vice-Chancellor, the Provost and other authorities of the University and hostel, who may be vested with the authority to exercise discipline under the Act, the Statutes, the Ordinances, including Ordinance XV (B), XV (C) and XV(D) (as stated in the 'Handbook of Information') and the Rules framed by the University and the hostel administration from time to time.
Dat	te
	D.S. KOTHARI HOSTEL, UNIVERSITY OF DELHI, DELHI-110007
Rec	eived Form No from Mr.
For	Admission in Course
Date	e Signature of Dealing Asst.