



DIAMOND HARBOUR WOMEN'S UNIVERSITY

Sarisha, Diamond Harbour Road, South 24 Parganas, West Bengal-743368

Website: www.dhwu.ac.in

Date: 04-10-2024

Notice

This is to notify that students both UG-I and PG-I interested in availing hostel facilities for the session 2024-2025 are to download the hostel accommodation form from the University website (www.dhwu.ac.in) and submit the same in the office of the Registrar by 30th October, 2024 (between 12 noon- to 3 pm). The list of selected candidates will be duly notified.

Sd/-

Madhumita Majumdar
Hostel Convener



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HOSTEL ADMISSION FORM

To
The Registrar
Diamond Harbour Women's University

Sir,

I hereby seek to apply for hostel accommodation within the University Campus, the following are my details:

Yours faithfully

PERSONAL DETAILS

1. Name of the Student: _____

2. Registration No/ Class Roll No.: _____

3. Name of the Degree: _____

4. Name of the Department: _____

5. Year & Semester: _____

6. Aadhar Card No: _____

7. Date of Birth: _____

8. Blood Group: _____ Rh _____

9. Any Known Chronic Diseases -----

10. Visible identification mark: _____

11. Email ID: _____

12. Mobile No. : _____

13. Religion: _____

14. Category: _____

15. Distance from residence to University: -----

PARENTS' DETAILS



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1. Father's Name: _____

2. Mother's Name: _____

3. Permanent Address: _____

_____ PIN _____

Tel. No.: _____

4. Address for Correspondence: _____

_____ PIN _____

Tel. No.: _____

Mobile No.: _____

Email ID: _____

5. Father's Occupation: _____

6. Father's Office Address: _____

_____ PIN _____

Tel. No.: _____

Mobile No.: _____

Email ID: _____

7. Mother's Occupation: _____

8. Mother's Office Address: _____

_____ PIN _____

Tel. No.: _____

Mobile No.: _____

Email ID: _____

LOCAL GAURDIAN'S (LG) DETAILS



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1. Name of LG: _____

2. Relation of LG with student: _____

3. Residence Address of LG: _____

_____ PIN _____

Tel. No.: _____ Mobile No.: _____

Email ID: _____

4. Occupation of LG: _____

I, _____ (Name of the Father/ Parent), hereby declare that _____ (Name of the nominated Local Guardian) is my _____ (Relation of Father/ Parent with Local Guardian) and I nominate him/ her as a Local Guardian of my ward _____ (Name of the student).

I, _____ (Name of the Local Guardian), have been nominated as a Local Guardian for _____ (Name of the student) during her stay in the Hostel by her father/ parent _____ (Name of the Father/ Parent). I am willing to act for the same. The copy (ies) of _____ (Name of the document/ documents of Local Guardian), is / are enclosed herewith as a proof of Identity and address.

Certified that:

- i. We shall undertake to pay all dues in respect of my ward.
- ii. We take full responsibility of our Ward and assure that she would maintain desired discipline and abide by all Rules & Regulations of Hostel of the University.
- iii. We assure that in case of misconduct, we shall arrange/ make alternate arrangement for stay of our Ward within 48 hours of the receipt of information from School.



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- iv. We assure that in the event of any change of address/ phone number(s), we shall inform the University immediately.

Signature of Parent/Guardian

Date: _____

Place: _____

Signature of Local Guardian

Date: _____

Place: _____

Necessary documents to be submitted:

1. Residential Certificate (Voter / Aadhar Card)
2. Income Certificate (Certified by not below the rank of BDO/ Gazetted Officer)
3. Local Guardian's Id (Voter / Aadhar Card)
4. Distance Certificate (from competent authority)
5. Medical Certificate of Fitness (including Blood groups)

HOSTEL ALLOTMENT DETAILS

(For Office use only & To Be Filled by Hostel Office Staff)

All the papers submitted by the student checked and verified and found to be correct.

Hostel Room No. Allotted: _____

Signature of the Hostel Authority/ Superintendent

Approved / Not approved,

Signature of the Registrar