



# UNIVERSITY OF LORALAI

ACCESS

QUALITY

RELEVANCE

## HOSTEL ADMISSION FORM

Name: \_\_\_\_\_ Father Name: \_\_\_\_\_ Gender: M/F

Department: \_\_\_\_\_ Program: \_\_\_\_\_ Semester: \_\_\_\_\_

CNIC#:      —        —

Session: \_\_\_\_\_ Roll #: \_\_\_\_\_ Cell No: \_\_\_\_\_ Blood Group: \_\_\_\_\_

Emergency Contact No: \_\_\_\_\_ Address: \_\_\_\_\_

**Signature of Applicant** \_\_\_\_\_

### **VERIFICATION FROM CONCERNED DEPARTMENT**

It is certified that Mr./Ms. \_\_\_\_\_ is studying in the department of \_\_\_\_\_ Program \_\_\_\_\_.

The particulars of the student have been verified and found correct. His/ Her proforma is recommended for issuance of single/ sharing room as per the University rules & regulations.

**Signature & Stamp  
of Chairperson**

Dated:- \_\_\_\_/\_\_\_\_/\_\_\_\_

### LIST OF ITEMS HANDED OVER TO STUDENT

S#	Description	Quantity	Checklist
1.	Bed		<input type="checkbox"/>
2.	Mattress		<input type="checkbox"/>
3.	Wardrobe		<input type="checkbox"/>
4.	Side Table		<input type="checkbox"/>
5.	Chair(s)		<input type="checkbox"/>
	Any other item		

### **UNDERTAKING:**

I certify that the aforementioned information given by me is correct. I understand that if any part of this information is found false/incorrect, my allotment shall stand cancelled. I also undertake to strictly observe all rules & regulations of the hostel. I shall comply with the direction and orders issued by the hostel authorities from time to time during the period of my stay in the hostel. I undertake further to pay all dues in time.

\_\_\_\_\_  
**Signature of Parent's / Guardian**

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**

Date: \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF HOSTEL WARDEN / IN-CHARGE**

### **FOR OFFICE USE ONLY**

**Remarks:** \_\_\_\_\_

**Hostel:** \_\_\_\_\_ **Room No:** \_\_\_\_\_

**Room Type:** Single ☐ Shared ☐

\_\_\_\_\_  
**SIGNATURE OF APPROVING AUTHORITY**