

National Institute of Fashion Technology - Gandhinagar (A statutory body under the NIFT Act 2006)

Hostel Application Form for Girls' Hostel

| All the details ir To, The Joint Directo NIFT Gandhinaga | r | e mandatory | to be filled; ot | herwise the f | orm will not be a | accepted |
|-------------------------------------------------------------------|-----------------|-------------------|-------------------|----------------|-------------------|----------|
| 1. Name of Stud | ent: | | | | | |
| (in Capital let | ter) | (First Name) | (Middle | Name) | (Last Name) | |
| 2. Roll No (As me | entioned in Pro | ovisional Adı | nission Letter re | ceived after N | NIFT Counselling) | |
| | | | | | | |
| 3. Date of Birth D | | . / | | I | / | |
| | | | | | | |
| 4. Name of Cours | se/Programme | 2: | | | | |
| 5. Batch: -2024 | | <u>6</u> . Semest | er: | | | |
| 7. Category :- | General | SC | ST | OBC | PHP | |
| | | (Tick mark | (√) in appropria | te Box) | | |
| 8. Telephone : | | | Student | 's Mobile No: | | |
| (With STD Co | de) | | | | | |
| Student E mail id :-(1)(2) | | | | | | |
| 9. Father's Nam | | | | | | |
| | (First Na | ame) | (Middle Nam | ie) | (Last Name) | |
| 10. Mother's Name: | | | | | | |
| 11. Resident Address : | | | | | | |
| | | | | | | |
| | | | | Din | | |

| | _Pin: |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| .3. Mother's office Address: | |
| | Pin: |
| .4. Telephone :- (R) (With STD Code) | (o) |
| Father's Mobile No: | , Mother's Mobile No: |
| Father's E-mail id: | , Mother's E-mail id: |
| 15.1.Are you in good health a infirmity or medical com If No, give full details:- | nd free from physical medical complaint and mental disease of plaints? : Yes / No |
| 5.2.Have you ever suffered a Yes, give full details:- | any of the Critical or General or Physical diseases/illness in past?If |
| | |
| .5.3. Have you ever suffered a If Yes , give full details :- | any Skin diseases or Allergic problems ?: Yes / No - |
| If Yes , give full details : | |
| If Yes, give full details : | |
| If Yes , give full details : | |
| If Yes , give full details : | al Guardian:- |
| If Yes, give full details : | al Guardian:- |
| If Yes, give full details : | |

¹ Refer section 7.(24) in Hostel Resident Brochure

19. Hostel Fee Details :- (Please see Fee order before filling the below table)

| Particular | Amount in Rs |
|--------------------------------------|--------------|
| Hostel Fee (Annual) | |
| Security Deposit Hostel (Refundable) | |
| Total Fee Amount in Rs. | |

20. Payment Details (Please fill as applicable)

| a. Online Payment | (| DR b. Demand I | Draft Payment |
|------------------------------------------------|-------------|-------------------------------------------|---------------|
| Paid through | Pay U/ RTGS | Name of Bank | |
| Transaction id | | D. D No | |
| Bank | | Payable at (Place) | |
| Amount Rs. (in figure) | | Amount Rs. (in | |
| | | Figure) | |
| Amount Rs. (in words) | | Amount Rs. (in | |
| | | words) | |
| In case of Multiple part payments, please fill | | Please mention student name and unique id | |
| detailing of all transactions | | behind the demand draft | |

| of StudentPhotographPhotographPhotograph(Attested by Mother / Father)of Fatherof Motherof Local Guardian | (Attested by Mother | • • | | • • |
|--------------------------------------------------------------------------------------------------------------|----------------------|-----|--|-----|
|--------------------------------------------------------------------------------------------------------------|----------------------|-----|--|-----|

21. DECLARATION:-

I hereby affirm that the statement made and information furnished by me in the Hostel Application Form is true and correct, further I undertake, if admitted, abide by the NIFT Hostel Residents Rules. Final decision for grant of admission to the Hostel will be bound to me as decided by Competent Authority of NIFT. I clearly understand that admission in Hostel cannot be claimed as a matter of right.I clearly understand that allotment of rooms to students and mode of occupancy is not a matter of right. I clearly understand NIFT will make all efforts to provide emergency medical care but the Institute cannot be held responsible for any eventuality. I clearly understand that I am responsible for seeking medical /clinical advice for all my ailments, diseases, infections from Campus doctor or outside and take necessary care and take medicines/treatment. I clearly understand that I have seen & read NIFT Hostel Residents Rules and undertake to follow it. In case of any non-compliance by me, the Institute has the right to expel me from the Hostel without any notice in writing. NIFT will not be responsible for any illegal and unauthorized activity attempted by Student or group of students.

| Date:- | | |
|---------|----------------------|----------------------|
| Place:- | Signature of Parents | Signature of Student |
| | | |

To be Filled by Academic Affairs / Hostel Unit Only:

| Enter | r at page NoEnt | ry No | of Hostel Accommodation | | |
|------------------------------------------------------------------------------------|---------------------------------------------------------------|-------------------------|-------------------------|--|--|
| Allotment Register at Academic units for approval of accommodation in Hostel Room. | | | | | |
| (1) | Name of Student : | | | | |
| (2) | Department : | - | | | |
| (3) | Admission Year(Batch) : | | | | |
| (4) | Semester : First Year students / Other S | tudents / Other Applica | ant | | |
| (5) | (5) Whether Accommodation allotted in Hostel Room :- Yes / No | | | | |
| (6) | If yes , Room No: | Date of allotment | : | | |
| (7) | Fee Paid Rs: | | | | |
| (8) PAYUReference No. / D.D. No: | | | | | |
| (9) | Bank Name: | | | | |
| (10) |) Receipt No:Date: | | | | |
| (11) | .) Remarks: | | | | |
| | | | | | |

Signature of Hostel WardenSignature of Hostel (I/c.)Signature of Joint Director

Annexure-II

Photo of the Student

NATIONAL INSTITUTE OF FASHION TECHNOLOGY,

NIFT Campus, GH-0 Road, Gandhinagar - 382007

UNDERTAKING BY THE STUDENTS FOR THE ACADEMIC YEAR___

- 1. IDaughter of..... admitted tocourse hereby give undertaking in respect of the following:
- 2. I will not smoke or consume any objectionable items in the NIFT Campus, Hostel, and Bus etc.
- 3. I will not take liquor or any objectionable items during any training or industry visits or projects etc. in NIFT in the Campus, Hostel or Bus or in any NIFT related Centers or places.
- 4. I will abide by all the rules pertaining to hostel reporting/entry time. I will go out after the required approval of Warden/Authority and I will report LATEST BY 10:15 PM TO THE HOSTEL.
- 5. I will not indulge in ragging directly or indirectly and will not resort to any undesirable activity which may tarnish the image of NIFT.
- 6. In case of any harassment to me or others, I will bring immediately the facts to the notice of the Chairperson/Joint Director/Warden or any others immediate available officer of NIFT. If any or these persons are not available, the facts will be brought to the notice of Director without delay.
- 7. I will abide by the above undertaking and all instructions given to me orally as well as in writing from time to time. If I am found breaking the rules and instruction in any way at any time, I am liable to be debarred from continuing with my programme or be subject to any other action deemed fit by the NIFT authorities.
- 8. I will conduct in order to keep and maintain appropriate cleanliness within hostel.
- 9. I have gone through the Hostel Residents Brochure available on NIFT Gandhinagar website and aware of all rules enumerated in it and undertake to follow the same.
- 10. I will use appropriately and maintain all the fittings/furniture provided in my room as well as facilities in common area^{*2}

² Refer Hostel Resident Brochure regarding the facilities provided in hostel

11-At the time of completion of year/vacating hostel, I will hand over the items allotted to me in neat & clean manner as it was allotted to me. I understand that in non-compliance of this Institute reserve right to recover penalty amount from the hostel security deposit.

Once again declare that I have seen and read the Hostel rules & regulations and agree to abide by the said rules and regulations.

I have read and understood the contents of rules and regulations for hostel residents and the undertaking before signing it.

| (2)-Mother's Name | | |
|------------------------------------|------------------|------|
| | Phone | (M): |
| (3)-Local Guardian Name, Address a | and Contact Nos. | |
| | | |
| | Phone | (M): |

In case of non-compliance by me, the institute has the right to expel me from the Hostel WITHOUT ANY NOTICE IN WRITING.

Place: Gandhinagar

.....

Date: _____

STUDENT'S NAME & SIGNATURE Contact Nos.: