

NOTE (Not Required for 1st Semester)

- **It is mandatory for all POINTS Hostel inmates to clear all their hostel mess and other dues of the previous semester and the same must be endorsed by the chairman / warden HMC to proceed for the current semester registration.**
- **If anyone fails to clear the dues and submit their form in the office, it will be treated as the applicant has not done the registration and the same will be rejected.**

As per HMC records, it is certified that the POINTS Hostel has “No Dues” against the Mr./ Mrs./ Ms.....

..... Reg. No..... Dept.....

Room No:.....

Block / Wing No:.....

Signature of Mess Manger / In-charge:

Name of Mess Manger / In-charge:

Signature of the Warden, HMC:

Name of the Warden, HMC:

Declaration

1. I hereby submit to the disciplinary jurisdiction of the Vice-Chancellor and the other Officers and Authorities of the Institute and shall observe and abide by the rules of the Institute (DIAT-DU) in that behalf.
2. I have gone through all DRC and Hotel Rules & Regulations. I hereby accept and follow the same.
3. I shall not request for any special concession such as change in time or day fixed for the University examination etc. on religious or any other ground.
4. I hereby declare that all statements made in this application are true, complete, and correct to the best of my knowledge and belief. I understand that in the event of any information being found false / incorrect, my candidature is liable to be cancelled or rejected and fees paid by me forfeited.

Yours faithfully,

Date: _____

(Signature of Research Scholar)

I certify that I have gone through this registration /re-registration form in r/o Mr. /Ms.....
..... and I find that the information given by the student is correct to my knowledge.

I recommend the application for **registration /re-registration / not to be re-registered.**

Signature of Co-Supervisor / External Supervisor (if any)

Date:

Signature of the Supervisor

Date:

I recommend the application for **registration / re-registration / not to be re-registered.**

Signature of the Head of the Department

Date:

I recommend the application for **registration /re-registration / not to be re-registered.**

Chairman, DRC.

Date: