

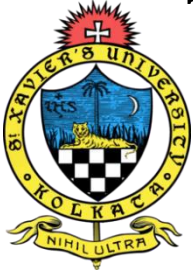
St. Xavier's University, Kolkata

New Town, Kolkata-700160

☎ Ph.: 033 6624 9881 | **Email:** enquiry@sxuk.edu.in

Email: hosteldirector@sxuk.edu.in

Website: www.sxuk.edu.in



Photo

Hostel Admission Form (2024-25)

Name (Block Letter): _____

Course: _____ Roll No.: _____ CIN _____ Year: _____

Contact No: _____ / _____ E-Mail Address: _____

Hostel Room Preference:

Two-Bed Room (Common Toilet) []; Two-Bed Room (Toilet Attached) []; Three-Bed Room (Toilet Attached) []

Toilet-Attached 2-Bed Room* []; (Second New Building) For Girl's

Religion: _____ Date of Birth: _____ / Gender: Male [] Female [] Third Gender []

Residence Address: _____

Father's Name: _____ : Occupation: _____

Mother's Name: _____ : Occupation: _____

Father's Contact No: _____ : Mother's Contact No: _____

Local Guardian's Name: _____ : Relationship: _____

Address: _____

Contact No: _____ : E-Mail Address: _____

Any Chronic Disease/Allergy (Please Specify): _____

Curricular Activities (If Any): Sports & Games: _____

Co-Curricular Activities: _____

Note:

1. Parents and Hostellers are required to submit a Declaration Form that can be availed from the Hostel Office at the time of Hostel Admission.
2. St. Xavier's University Hostels are meant to be spaces of learning, quiet and peace to create a feeling of **home away from home**. Hence, the hostellers are urged to adhere to the **Hostel Policy, Rules and Regulations (Revised)** of the University uploaded on the University Website and maintain respect for authorities, teachers, and fellow hostellers.
3. Parents and Hostellers are encouraged to **acquaint themselves Hostel Policy, Rules and Regulations (Revised)** of the University and their cooperation with the Hostel Management is solicited for the smooth running of the Hostels.
4. **The Vice Chancellor is endowed with absolute authority to take the final decisions regarding the disciplinary measures.**

I hereby affirm that I have read and understood the Hostel Policy, Rules and Regulations (Revised) and the Declaration Form, and I will abide by them.

I certify that the above information is correct. My Hostel allotment may be cancelled if any of the above information is found to be incorrect.

I shall be responsible for my ward's conduct and undertake to pay the Hostel Fees/Bills regularly. I shall cooperate with the Hostel Management.

Applicant's Signature with date

Parent's / Guardian's Signature with date

Verified and Admitted /Not Admitted

Deputy Director of Hostel (Men/Women)

Executive Director, SXUK Hostels