NOTICE

Dated: 22 Jul 2025

All students seeking admission in the college hostel are required to send an application on email ID: <u>hostel@lic.du.ac.in</u>

Students to take note of the following:-

- Attach Hostel Admission Form duly filled.
- Fees to be paid on confirmation.
- Performa of fee to be attached.

Warden

Nulina Aslhar Director

LADY IRWIN COLLEGE Sikandra Road, New Delhi – 110001 Admission Form for Hostel (2025-26)

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Name of Student:				
(In capital letters)				
Course Admitted to:	last exam passed:	% of marks:		
ate of Birth:Age*as on 1st October 2025:				
Category: Gen/SC/ ST/OB	C/ PH/any other (specify	y)		
Nationality:	Religion:			
State of Domicile: (If foreign National)				
Passport No (if, foreign student):Place of issue:				
Aadhaar No.:				
Father's Name:(As per school certificate)		Mother's Name:	_	
Father's Occupation: Mother's Occupation:				
Family Income per annum	(Rs.):			
Permanent Address				
Telephone No: Res.	Office:	Mob. :		
Period of previous stay in the Hostel with dates: Room No:				
Any other Information (if a	iny):			
No. of Enclosures with the	e form:			
 College admission 1 Proof of Residence. Photocopy of last e: Photographs of Can 	kam pass mark sheet.	l guardians with signatures.		

- Anti- ragging affidavits which is attached with this form should be duly signed by parents and student.
- 6. Hostel Fee Slip.

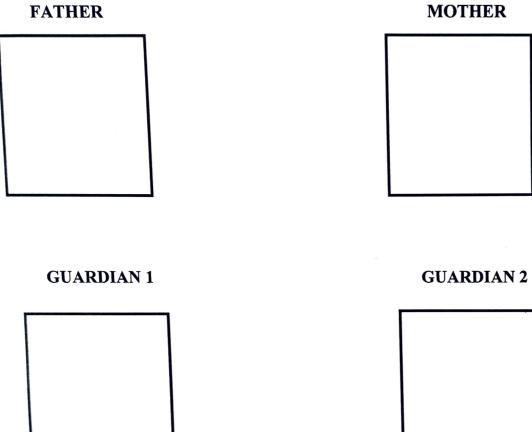
PERSONAL DETAILS OF PARENTS AND LOCAL GUARDIANS

Name of Candidate (In Block Letter):				
	Year:			
Father's Name:				
	Email:			
Mobile No.:	Email:	,		
(A) Local Guardian's Name:	Relationship with Student:			
	Mobile No.:			
	Residence:			
	Relationship with Student:			
	Mobile No.:			
	Residence:			

Date: _____

Signature of Student: _____

PHOTOGRAPHS



Phone / Mobile no. and Address/s must be operative at all time. The college hostel should be informed of any or all updates and changes.

MOTHER

ANNEXURE I

AFFIDAVIT BY THE STUDENT

I, ________ (full name of student with Institute Roll Number) s/o d/o Mr. / Mrs. / Ms., _______ having been admitted to _______ (name of the institution) have received or downloaded a copy of the UGC Regulations on Curbing the Menace of Ragging in Higher Educational Institutions, 2009. (Hereinafter called the "Regulations") carefully read and fully understood the provisions contained in the said Regulations.

- 1. I have, in particular, perused Clause 3 of the Regulations and am aware as to what constitutes ragging.
- 2. I have also, in particular, perused Clause 7 and Clause 9.1 of the Regulations and am fully aware of the Penal and administrative action that is liable to be taken against me in case I am found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
- 3. I hereby solemnly aver and undertake that
 - a) I will not indulge in any behavior or act that may be constituted as ragging under Clause 3 of the Regulations.
 - b) I will not participate in or abet or propagate through any act of commission or omission that may be constituted as ragging under Clause 3 of the Regulations.
- I hereby affirm that, if found guilty of ragging, I am liable for punishment according to Clause
 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against me under any penal law or any law for the time being in force.
- 5. I hereby declare that I have not been expelled or debarred from admission in any institution in the country on account of being found guilty of, abetting or being part of a conspiracy to promote ragging; and further affirm that, in case the declaration is found to be untrue, I am aware that my admission is liable to be cancelled.
- 6. Along with the above mentioned points I do hereby declare that
 - a) I will obey the code of conduct of the institute and do not indulge in any kind of indisciplined activity while in and off the institution campus.
 - b) I will be solely responsible for any kind of accident/ mishap caused on account of the above mentioned Clause (6:a).

Declared this _____day of _____month of _____year.

Signature of Deponent

Name: _____

VERIFICATION

Verified that the contents of this affidavit are true to the best of my knowledge and no part of the affidavit is false and nothing has been concealed or misstated therein.

Verified at _____(place) on this the _____(day) of _____(month) (year)

Signature of Deponent

Solemnly affirmed	and signed in my presence on this the	day
of	(month)	(Year) after reading the contents of
this affidavit.		

OATH COMMISSIONER

<u>Note</u>: It is mandatory to submit this affidavit in the above format, if you desire to register for the forthcoming academic session.