Phone: 26569364, 26535637

| Form No  |  |
|----------|--|
| FOITH NO |  |

# YOUNG WOMEN'S ASSOCIATION WORKING WOMEN'S HOSTEL NO. 1 ADYA JHA HOSTEL- C-3, Safdarjung Development Area, Hauz Khas, New Delhi - 110016

Price Rupees One Hundred Fifty Only

# APPLICATION FOR ALLOTMENT OF ACCOMMODATION IN THE HOSTEL

1 <u>Latest Passport Sized Photograph</u>

Paste Photograph

| 2   | Name of the applicant (in block letters)   |
|-----|--|
| 3   | Permanent address of the applicant   |
|     |  |
| 4.  | Present address for the purpose of correspondence;   |
|     | parpeds of softesportdefice,   |
|     | email address,,,,,,,,,,  |
| 5.  | Status:Married/Unmarried/Widow/Divorced  |
| 6.  | The or birth (in rightes & words   |
| 7.  | · · · · · · · · · · · · · · · · · · ·  |
| 8.  | · tengleti   |
| 9.  | Name, occupation, address & telephone number of legal guardian (specify whether father/husband/mother/legal guardians)               |
| 10. | Name, occupation, address & telephone number of residence and office of the local guardian and his/her relationship to the applicant |
| 11  | Name, address and telephone number of current employer   |
| 12  | Whether details of employment of applicant attached (Yes / No)   |
| 13. | Type of accommodation required Specify: Dormitory/Triple/ Double/Single  |
| 11  | The small start also all 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |

- 14. The applicant should attach the following with application:
  - a. Three passport size photograph signed by the applicant
  - b. Letter of reference from two local persons (not related to the applicant) on their letter head.
  - c. A letter <u>from the employer</u> on the Firm's letter Head giving date of appointment, designation, type of post (permanent/temporary/probation) and monthly remuneration signed by an authorized person and carrying the seal of the firm with designation.
  - d. Medical Certificate (Local)
  - e. Undertaking by legal guardian in prescribed format
  - f. Legal guardian to send a letter by post or email approving her stay and appointment of local guardian.
  - g. Undertaking by local guardian in prescribed format

#### 15. APPLICANT'S DECLARATION AND UNDERTAKING

- I hereby declare that all the aforesaid particulars given by me are correct. My allotment may be cancelled if any of these particulars are found to be incorrect or information is withheld wilfully.
- II. I have read the Rules & Regulations of the Hostel and will abide by them.
- III. I agree to abide by all decisions taken by the managements in matters concerning accommodation, discipline and conduct and will be binding on me.
- IV. I undertake to vacate the accommodation after three years.
- V. I accept that the hostel authorities will have a right to ask me to vacate the accommodation even before the expiry of three years.
- VI. I will make timely payment of dues to the office. Before leaving the hostel I shall clear my dues in full and hand over the property of YWA to the warden.
- VII. I shall not associate myself with any activity considered undesirable by the authorities. If I do so my allotment of accommodation may be cancelled.
- VIII. I shall bring my local guardian with me when I am asked to appear for personal interview before the Admission Sub Committee of the Young Women's Association.
- IX In case of any misconduct or misbehaviour on my part, the management to get the seat vacated within 24 hours.

|               | Signature of the Local Guardian | Sign          | ature of the applicant        |
|---------------|---------------------------------|---------------|-------------------------------|
|               |                                 |               |                               |
|               |                                 |               |                               |
|               | Name:                           | Nam           | e:                            |
|               |                                 |               |                               |
|               | Date:                           | Date          |                               |
|               |                                 |               |                               |
|               | TO BE FILLED IN BY TH           | IE MANAGEMENT |                               |
|               |                                 | has ha        | an allotted accommodation     |
| Kumari/Shrin  | nati                            | nas bei       | anotted accommodation         |
| in Adya Jha I | Hostel in Room No at F          | Rs            | p.m. w.e.f                    |
|               |                                 |               |                               |
|               |                                 |               | Authorised Official of YWA    |
|               |                                 |               | Additions of Children of TVVA |

Date:....

## **Undertaking By Local Guardian**

| То  | Date                              |  |  |
|---|-----------------------------------|--|--|
| The Warden Young Women's Association (Regd.) Working Women Hostel No. I C-3, S.D.A. Hauz Khas, New Delhi – 110016   | Photo<br>of the Local<br>Guardian |  |  |
| Dear Madam,   |                                   |  |  |
| 1(Local   | Guardian) do hereby               |  |  |
| consent to the following:-  |                                   |  |  |
| (i) Agree to be local guardian of Ms  | *******************************   |  |  |
| (ii) Agree to take full responsibility of my ward in case of any emergency such as illness, misconduct, misbehaviour, as reported to me by the management and |                                   |  |  |
| (iii) Take full responsibility to clear all dues of ward, in c  | ase of default.                   |  |  |
| (Signature of Local Guardian)   |                                   |  |  |
| Name :(Block Letters)   |                                   |  |  |
| Relationship to Resident  |                                   |  |  |
| Address   |                                   |  |  |
| *   |                                   |  |  |
| Telephone No  |                                   |  |  |
|   | Yours Truly,                      |  |  |

(Signature of Local Guardian)

## **Undertaking By Legal Guardian**

| То  | Date                           |  |  |  |
|---|--------------------------------|--|--|--|
| The Warden Young Women's Association (Regd.) Adya Jha Hostel C-3, S.D.A., Hauz Khas, New Delhi – 110016 | Photo<br>of the Legal Guardian |  |  |  |
| Dear Madam,   |                                |  |  |  |
| Mother/Legal Guardian/Husband) do hereby  |                                |  |  |  |
| consent to the following:-  (i) Appointment of  | n case of any emergency        |  |  |  |
| (iv) Take full responsibility to clear all dues of wa   | ard, in case of default.       |  |  |  |
| (Signature of Legal Guardian)   |                                |  |  |  |
| Name :(BI   | ock Letters)                   |  |  |  |
| Relationship to Resident  |                                |  |  |  |
| Address   |                                |  |  |  |
|   |                                |  |  |  |
| Telephone No  |                                |  |  |  |
|   | Yours Truly.                   |  |  |  |

(Signature of Legal Guardian)