



चौधरी रणबीर सिंह विश्वविद्यालय, जीन्द  
**Chaudhary Ranbir Singh University**

Established by Govt. of Haryana Legislature Act No.28 of 2014  
(Recognized Under Section 12(b) & 2(f) of UGC Act, 1956)



**Prof. S.K. Sinha**  
(Chief Warden)

Email: wardenbh@crsu.ac.in  
PH: 01681-241028

**NOTIFICATION**

The applications are invited for Girls and Boys Hostels of CRSU, Jind. The rule and regulations regarding the hostel facilities are mentioned in the Hostel Prospectus which is uploaded at website of CRSU, Jind. The student will be submit the hostel application duly attested by the Chairperson to the concerned hostel office.

The scheduled is as:

**Application form start date: 01/08/2024**

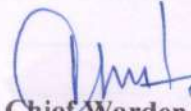
**Last Apply Date: 07/08/2024**

**Display merit list: 08/08/2024**

**Prospectus fee:**

**For Gen/OBC: Rs.200/-**

**For SC/ST: Rs.50/-**

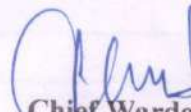
  
Chief Warden 30/07/24

**Ends no. CRSU/BH/2024/284-87**

**Date: 30/07/2024**

A Copy of the above is forwarded to the following for information and necessary action:

1. All Chairpersons, UTD, CRSU, Jind.
2. PS to Vice-Chancellor (For Kind information of the Hon'ble Vice-Chancellor), C.R.S. University, Jind.
3. PA to Registrar (For kind information of the worthy Registrar), C.R.S. University, Jind.
4. Incharge , UCIC ( To uploaded at the University Website).

  
Chief Warden 30/07/24

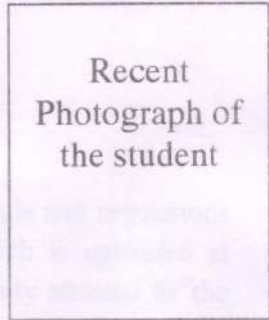


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**HOSTEL ADMISSION FORM (2024-25)**

1. Name of student: \_\_\_\_\_
2. Course: \_\_\_\_\_
3. Blood Group of student: \_\_\_\_\_
4. Adhaar Card No: \_\_\_\_\_
5. Date of Birth: \_\_\_\_\_
6. University Roll No. \_\_\_\_\_
7. Category: \_\_\_\_\_
8. Student E-mail ID: \_\_\_\_\_
9. (a) Father's Name: \_\_\_\_\_ (b) Mother's Name: \_\_\_\_\_
10. Parents E-mail ID: \_\_\_\_\_
11. Permanent Address: \_\_\_\_\_  
\_\_\_\_\_
12. Student's Mobile No: \_\_\_\_\_ Father's Mobile No: \_\_\_\_\_
13. Correspondence Address: \_\_\_\_\_  
Landline No: \_\_\_\_\_ Mobile No: \_\_\_\_\_
14. Name & Address of local: \_\_\_\_\_  
Guardian (if any): \_\_\_\_\_  
Mobile No. of Guardian \_\_\_\_\_ Landline Phone.No. of Guardian \_\_\_\_\_
15. Distance from residence: \_\_\_\_\_ KM(s)
16. Availing Bus pass facility: Yes/No
17. Detail of CRSU hostel accommodation, if any, immediate past session:  
(a) Hostel Name: \_\_\_\_\_ (b) Room No. \_\_\_\_\_



**Verify by Chairperson/  
Incharge of the department**

18. (a) Pending Dues : Rs. \_\_\_\_\_ (b) Disciplinary action, if any (for Ex- resident): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(The columns 18 (a) & (b) be completed by previous Hostel Supervisor)