

Undertaking

(Produce contents of this Undertaking on Judicial Stamp Paper & attach it with hostel form)

I _____ D/O _____ do hereby undertake:

1. That I shall live in accordance with the Islamic manners of life.
2. That I shall neither allow any illegal student/guest to live with me in my room during my stay in hostel. If I violate this, Hostel management will have the right to cancel my seat and take disciplinary action.
3. That I will not disturb the atmosphere of the hostel by any means. In case of my involvement in any subversive/disturbing activity, the hostel management can cancel my seat.
4. That I will not indulge in any political activity or in any group/party in this regard in the hostel.
5. That I shall abide by all the rules/regulations of hostel & instructions of the hostel administration issued from time to time during my stay in hostel.
6. That I shall respect Hostel Officers/Staff and the Security staff on duty.
7. That I shall comply with all the safety & security protocols conveyed or implemented through Security staff.
8. That I will never leave Hostel Premises without taking permission from the Wardens.
9. I will ensure my attendance every night, and three consecutive night absences without information will lead to cancellation of seat.
10. That I will follow the time of Entry & Exit of Female Hostel. In case of violation, Hostel Management/Staff have authority to take disciplinary action and cancel the seat.
11. That I am not an IIU employee.
12. That I will not resort to the courts for the sake of retention of hostel seat illegally and unnecessarily or prolonging its occupancy for illegal excuses which are not covered under IIU Hostel Rules and Regulations.
13. I will not allow any outsider other than approved visitor on the hostel form to meet or enter the hostel in my name.
14. I have no objection on utilization of surplus amount out of mess account (if any) by the University Authorities.
15. I shall bear full responsibility for my personal belongings.

The above information is true to the best of my knowledge. If any information given above proves to be false, I will be held responsible for that which may lead to cancellation of my admission as well as hostel seat.

Dated: _____

Signature of Applicant: _____

Witness No. 1

Name: _____

CNIC No.: _____

Contact No.: _____

Signature: _____

Witness No. 2

Name: _____

CNIC No.: _____

Contact No.: _____

Signature: _____