

CERTIFICATE

(This certificate should be printed on Affidavit/ Stamp paper)

National Skills University Islamabad
Faiz Ahmad Faiz Road, Sector H-8/1, Islamabad
Islamabad 44310
[Date]

Undertaking by Student

I, _____, son/daughter of _____, has been allotted a room in NSU Hostel for the academic year _____ to _____. I hereby acknowledge and understand the following terms regarding my hostel allotment:

1. I understand that my room allotment is valid for one academic year only, and I must renew my application at the end of the year.
2. I commit to all hostel rules and regulations as set forth by the Hostel Administration. These rules include, but are not limited to, maintaining cleanliness, respecting common areas, adhering to quiet hours, and ensuring the safety and security of all residents.
3. I am aware that failure to adhere to the hostel rules and regulations may result in disciplinary action as per Hostel and University rules, including the cancellation of my allotment. In such cases, I understand that I may be required to vacate the premises without refund of any fees paid.
4. I will vacate the room and handover it to the hostel management/administration before going home on summer/winter vacations or any other unavoidable situation in case the hostel is closed.

I have read and understood the above points and agree to abide by them throughout my stay in the hostel.

Signature: _____

Date: _____

Undertaking by Parent/Guardian

I _____ relationship _____ CNIC _____ address _____ fully agree with the declaration and undertaking given by my ward, will adhere to all the rules and regulations of the hostel.

1. I shall monitor his/her behavior throughout his/her stay at hostel and also assure that the hostel fee will be paid within due time as per rules.
2. I understand any violations/indiscipline on part of my ward will attract fine or expulsion, rustication etc.
3. I give the undertaking that I will not make the hostel administration or Institute liable if my son/daughter/ward meet with any accident or goes missing or suffer injuries or in case of death due to unpredictable cause or unavoidable circumstances.
4. I solemnly declare that the above details are true to the best of my knowledge and belief, and it conceals nothing and no part of it is false.

Signature of the Parent/Guardian: _____

Mobile No. _____

Date: _____

Attested by:

Magistrate or Oath Commissioner