



जम्मू केंद्रीय विश्वविद्यालय

CENTRAL UNIVERSITY OF JAMMU

कंप्यूटर विज्ञान एवं अभियांत्रिकी विभाग

DEPARTMENT OF COMPUTER SCIENCE & ENGINEERING

(राया-सूचानी) बागला, जिला सांबा 181143- , जम्मू एवं कश्मीर
Rahya-Suchani (Bagla), District Samba-181143, Jammu (J &K)

Physical Reporting of the B. Tech. 1st year Candidates

Physical Reporting at Central University of Jammu (Vivekanand Engineering Block, PMMMNMTT Building) by all candidates who have confirmed their seats through JoSAA-2024 and/or CSAB-2024 Special and/or Spot Rounds is scheduled from 10-Aug.-2024 to 14-Aug.-2024. If any student is not able to report according to the specified schedule then she/he must take prior permission from palak.cse@cuajammu.ac.in with valid reason indicating the desired date of reporting.

The Orientation and Classes of B. Tech first year students are scheduled to be commenced from 20th Aug. 2024.

During the physical reporting you need to show the original documents listed in the checklist attached herewith. In addition, you are required to submit a set of documents according to the checklist.

For the candidates other than the Jammu and Kashmir state, it is to inform that the prepaid mobile SIM cards of the other states do not work in Jammu and Kashmir. Therefore, the candidates from the other states are suggested to bring a post-paid SIM card for their communication purpose.

For hostel related queries you may contact the following:

- For Boys:

- (1) Dr. Priyank Sharma (Warden):
Mobile: 8989976998
Email: priyank.ece@cuajammu.ac.in
- (2) Dr. Gourav Kumar (Warden):
Mobile: 9622528040
Email: gourav.cse@cuajammu.ac.in

- For Girls:

- (1) Dr. Amita Gupta (Warden):
Mobile: 94594497552
Email: amita.ccrcc@cuajammu.ac.in
- (2) Dr. Misbah Shafi (Warden) :
Mobile: 9469880266
Email: misbah.ece@cuajammu.ac.in
- (3) Dr. Shaveta Kohli (Warden)
Mobile: 9419167914
Email: shaveta.eco@cuajammu.ac.in



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DEPARTMENT OF COMPUTER SCIENCE & ENGINEERING

राया-सूचानी (बागला), जिला सांबा -181143, जम्मू (जम्मू एवं कश्मीर)
Rahya-Suchani (Bagla), District Samba-181143, Jammu (J &K)

Physical Reporting/Registration form

Reporting Date: _____

Department: _____

Programme: _____

Course: _____

Name of the Student: _____

Date of Birth (DD/MM/YYYY): _____

Gender (Male/Female): _____

Father Name: _____

Mother Name: _____

Address with pincode: _____

State: _____

Blood Group: _____

Mobile No.: _____

Email id: _____

Parent's email id: _____

Parent's mobile no.: _____

(*all fields are mandatory)

Signature of the student

Parents Signature

Signature of HOD
Department CSE
Central University of Jammu

Paste your latest
photograph

JEE (Mains) Application Number:..



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Rahya - Suchani (Bagla), District: Samba – 181143, Jammu (J&K)

ANTI RAGGING- UNDERTAKING BY THE STUDENT

I, _____ (full name of student with University Registration Form No.) S/o D/o Sh. / Smt., _____, having been admitted to the **Department of** _____ **Central University of Jammu**, have 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. I further undertake that:

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 will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
4. 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.
5. 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.
6. 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.
7. 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 in-disciplined 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 abovementioned clause (6.a).

Undertake this on/07/2024.

Signature of Student

Name:



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Rahya - Suchani (Bagla), District: Samba – 181143, Jammu (J&K)

ANTI RAGGING- UNDERTAKING BY THE PARENTS/GUARDIAN

I, Mr. / Ms. _____ (full name of parent / guardian) father/mother/guardian of, Mr./Ms. _____ (Name of Student with University Registration number), having been admitted to Department of _____, Central University of Jammu 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. I hereby solemnly aver and undertake that:

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 my ward in case he/she is found guilty of or abetting ragging, actively or passively, or being part of a conspiracy to promote ragging.
3. My ward will not indulge in any behaviour or act that may be constituted as ragging under clause 3 of the Regulations.
4. My ward 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.
5. I hereby affirm that, if found guilty of ragging, my ward is liable for punishment according to clause 9.1 of the Regulations, without prejudice to any other criminal action that may be taken against my ward under any penal law or any law for the time being in force.
6. I hereby declare that my ward has 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, the admission of my ward is liable to be cancelled.
7. My ward will obey the code of conduct of the institute and do not indulge in any kind of in-disciplined activity while in and off the institution campus.
8. My ward will be solely responsible for any kind of accident/mishap caused on account of the above mentioned clause (6.a).

Declared this on/07/2024.

Signature of Parent/Guardian

Name:

Address:

Telephone / Mobile No.:



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Document Checklist

B.Tech. branch:			
Name of Student		Date of Birth	
Father's Name		Category	
Mother's Name		Religion	
Student Aadhar No.		JEE Score	

Sl. No.	List of Documents	Verified & Retained (Yes / No)		Remarks
		Max. Marks	Marks obtained	
1.	Class10 th MarksSheet & Certificate (Self-Attested Photocopy)			
		%Marks		
2.	Class12 th MarksSheet & Certificate (Self-Attested Photocopy)			
		%Marks		
		%Marks		
3.	JEE-2024 Score Card (Self-Attested Photocopy)			
4.	Anti-Ragging Form duly signed by the Student & Parent / Guardian (Original)			
5.	Character Certificate (Self-Attested Photocopy)			
6.	Migration/Transfer Certificate (Original)			
7.	Gap Certificate (if any) (Original)			
8.	Category certificate, as applicable, as per GoI rules (Self-Attested Photocopy)			
9.	Aadhar Card (Self-Attested Photocopy)			
10.	Fee Receipt (Self-Attested Photocopy)			
11.	Four print copies of recent passport size photographs			
12.	One digital passport size photograph (not scanned) to be emailed to: arun.cse@cuammu.ac.in			

Academic and other details of the candidate have been checked and verified by the undersigned with original Certificates (wherever applicable) on...../...../2024.

Signature of Departmental Faculty (1):

Name:

Designation:

Signature of Departmental Faculty (2):

Name:

Designation:



Central University of Jammu
Application Form for Admission to Hall of Residence
for the Academic Session:.....

Affix Recent
Photograph

1. Name (In Capitals):.....
2. Department:..... Course:
3. Semester:..... University Roll No.:.....
4. Father's Name (In Capitals):
5. Mother's Name (In Capitals):
6. Religion:
7. Category: General/ SC/ST/OBC/ PwD:
8. Nationality:
9. Blood Group:
10. Whether Suffering from any Medical Condition / Illness: Yes: No.....
11. If Yes, Provide details:
12. Permanent Address (As given in the Admission Form):
-
- Village / Town: Post Office:.....
- Police Station:
- Tehsil / Block: District:
- State:.....Pin Code:
13. Correspondence Address (if different from Permanent Address):
-
- Village / Town: Post Office:.....
- Tehsil / Block: District:
- State:..... Pin Code:
14. Contact Number:
15. E-mail address:
16. Residence Landline No. (with STD Code):
17. Father's Mobile No:
18. Mother's Mobile No:
19. Name of Local Guardian:
20. Relationship with the Applicant:.....
21. Local Guardian Residence Landline No. (with STD Code):
22. Mobile Number of Local Guardian:
23. E-mail address of Local Guardian:

24. Address of Local Guardian:

.....
Village / Town:Post Office:.....Tehsil / Block:District:
.....State:..... Pin Code:

Details of Previous Stay in any Hall of Residence of Central University of Jammu:

1. Name of the Hall of Residence:
2. Duration: From To
3. Department: Course:
4. Whether any Disciplinary Action was taken against you during your stay in the Hall of Residence: Yes No

I, Ms. / Mr..... will abide by all the rules laid down by the Hall of Residence, Central University of Jammu. I assure that I shall follow all the rules of the University for maintaining discipline inside the Department and the Hall of Residence. Further, I am aware that in case I violate any of the rule, I am liable to be fined / expelled from the hostel. In addition, I state that the information provided in this form is true to the best of my knowledge and nothing has been concealed therein. My admission to the Hall shall be cancelled and security deposit forfeited if any information provided in this form is found to be false / incorrect. Further, incomplete application form will be rejected. I understand that filling up this application form does not guarantee admission to the Hall of Residence.

Signature of the Applicant:

Name: Date: Place:

The information provided by my daughter / son / ward in this form is true to the best of my knowledge and nothing has been concealed therein.

Signature of the Parent / Guardian / Local Guardian:

Name: Date: Place:

Recommendation from the Head of Department

Ms. / Mr. has taken admission in the Department of.....in the Course..... in Semester for the Academic Session..... I recommend her / his for allotment of a seat in the Hall of Residence of Central University of Jammu.

Signature of Head of Department with Seal:

Date:

Place:

DOCUMENTS TO BE ATTACHED WITH THE APPLICATION FORM

1. Copy of University Admission Fee Receipt
2. Copy of Proof of Permanent Address
3. Copy of Valid ID Card

FOR OFFICE USE ONLY

Recommendation of the Warden (only for students seeking re-admission):
.....

Ms. /Mr. is admitted to the Hall of Residence,
Central University of Jammu for the Academic Session-

Signature of Warden:

Signature of Dean, Students' Welfare:

ADMISSION DETAILS (TO BE FILLED BY OFFICE)

1. Name of the Student:.....
2. Hall of Residence Fee: Rs.
3. Hall of Residence Security: Rs.
4. Advanced Mess Charges for the Month of: Rs.
5. Payment Details: DD / Cheque Number:
6. Date of DD / Cheque:
7. Name of Issuing Bank & Branch:
8. Receipt No.: Date:
9. Room No. Allotted:

Signature of the Office Assistant:Date

Signature of Warden: Date

Signature of Dean Students' Welfare: Date

Consent Form for Parents / Guardian

1. Name of the Applicant (In Capitals):.....
2. Department:..... Course:
3. Semester:.....
4. Relationship with the Applicant:

I,..... Father / Mother / Guardian of Ms.
..... give my consent for my daughter
/son/ ward to do the following:

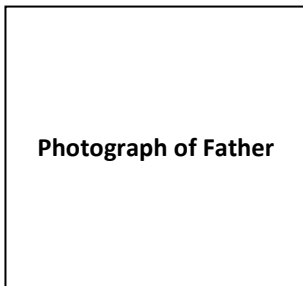
1. Travelling back to home alone Yes No
2. Overnight stay at Local Guardian's Residence Yes No

The address of the Local Guardian of my daughter/son/ward is:

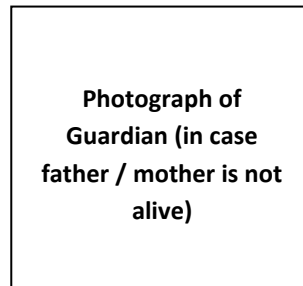
.....
.....

Village / Town:Post Office:..... Tehsil / Block:
District: State:..... Pin Code:

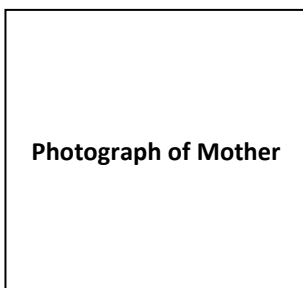
Photographs of the (father, mother) / guardian & local guardian are affixed below:



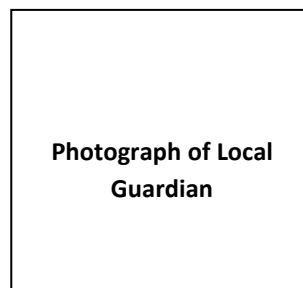
Photograph of Father



Photograph of Guardian



Photograph of Mother



Photograph of Local Guardian

Signature of the Parent / Guardian

Name of the Parent / Guardian

Date Place