TEZPUR UNIVERSITY



(संसद के अधिनियम द्वारा स्थापित केंद्रीय विश्वविद्यालय) (A Central University established by an Act of Parliament)

Notification

This is for information of all concerned that the following 'B'. 'C', 'D' and 'E' Types of Residential Quarters of the University are advertised for occupation:

| Vacant | Likely to be Vacant |
|-------------------------------|----------------------------|
| | See See |
| B-04, B-21, B-57, B-93, B-100 | B-14, B-24 |
| C-4, C-78, C-92 | C-30, C-39 |
| 1 | D-33 |
| E-03 | Nation and a second second |

Entitled employees of the University may submit their applications as per the format attached herewith to the undersigned on or before 31/07/2020.

Further, the employees, who want to change their present residential accommodations may also submit their applications as per the format attached herewith to the undersigned on or before 31/07/2020.

Those who have applied earlier are requested to apply again in the new format.

Sd/-(H. Saikia) Joint Registrar (GA)

Date: 14-07-2020

No. TU-15/28/Estate/871

- 1. Secretary to the Vice-Chancellor, Tezpur University for kind information of the Vice-Chancellor.
- 2. Pro Vice-Chancellor, Tezpur University.
- 3. Chairperson, House Allotment Committee, Tezpur University
- 4. Finance Officer, Tezpur University.
- 5. Executive Engineer, Tezpur University
- 6. Webmaster, Tezpur University for publishing it in Tezpur University website.
- 7. Concerned file.

Joint Registrar (GA)



APPLICATION FORM RESIDENTIAL ACCOMMODATION ALLOTMENT TEZPUR UNIVERSITY

| 1. | Name : | | | | | | |
|----|--|---------|--|--|--|--|--|
| 2. | Designation : | | | | | | |
| 3. | Category : General/SC/ST/Differently Abled | | | | | | |
| 4. | Department/Center/Office : | | | | | | |
| 5. | Pay Matrix Level : | | | | | | |
| 6. | Present Basic Pay : | | | | | | |
| 7. | Date of Joining in Service at Tezpur University a. In the Present Position b. First Joining at TU (If, the present position is different than earlier position) Please state, if spouse is employed in Tezpur : Yes/No University. If yes, please provide Name of the Spouse Designation Department/Center/Office Accommodation Provided by University : Yes/No UNDERTAKING BY THE APPLICANT | in a | | | | | |
| | (i) I do hereby declare that I shall abide by the "Residential Accommodation Allotment and Vacation Regulations 2020" of the University, if any residential accommodation is allotted to me. (ii) If the entitled accommodation as per my Pay Matrix Level is not available, I shall accept/ not accept residential accommodation, which is lower/higher than my entitlement. | | | | | | |
| I | Date Signature of the Applicant | | | | | | |
| | Forwarded by Controlling Officer | | | | | | |
| - | For Office use | | | | | | |
| | Information under Sl. No. 2-8 are verified and found correct/incorrect. | | | | | | |
| | | | | | | | |
| _] | Dealing Assistant Registrar/Section Officer (I | E) | | | | | |
| | Decision of the House Allotment Committee | | | | | | |
| | | | | | | | |
| | AllottedWaitlist NumberWaitlist Number | | | | | | |
| | | u faria | | | | | |

Member Convener, HAC

Chairman, HAC



APPLICATION FORM CHANGE OF RESIDENTIAL ACCOMMODATION ALLOTMENT TEZPUR UNIVERSITY

| 1. | Name : | | | | | |
|-----|--|---|--|--|--|--|
| 2. | Designation : | | | | | |
| 3. | Category : | General/SC/ST/Differently Abled | | | | |
| 4. | Department/Center/Office : | | | | | |
| 5. | Pay Matrix Level : | | | | | |
| 6. | Present Basic Pay : | | | | | |
| 7. | Present Accommodation Details a. Present Quarter Number b. Previously Occupied Quarter Numbers c. Date of Allotment for Present Quarter | | | | | |
| 8. | Have you change Accommodation more than Once in Same Type of Accommodation? | : Yes/No | | | | |
| 9. | Reason for Change/Shifting of Present Quarter | 집일 그렇게 되는 것이 되었다. | | | | |
| 10. | Any choice a. Type of Quarter b. Quarter Number UNDERTAKING BY T | : RCC/AT : HE APPLICANT | | | | |
| | | | | | | |
| | | the "Residential Accommodation Allotment and sity, if any residential accommodation is allotted to modation, which is not as per my choice. | | | | |
| I | Date | Signature of the Applicant | | | | |
| | Forwarded by Controlling Officer | | | | | |
| | For Office use | | | | | |
| | Information under Sl. No. 2-8 are verified and found correct/incorrect. | | | | | |
| | Dealing Assistant | Assistant Registrar (E)/Section Officer (E) | | | | |
| | Decision of the House Allotment Committee | | | | | |
| | AllottedTypeQuarter NumberWaitlist Number | | | | | |
| | V I | * | | | | |

Member Convener, HAC

Chairman, HAC