OFFICE OF THE PRINCIPAL & SECRETARY

লোকনায়ক অমিয় কুমাৰ দাস মহাবিদ্যালয়
LOKANAYAK OMEO KUMAR DAS COLLEGE

Accredited by NAAC (Second cycle) B+

Dr. Sukdev Adhikari
Principal
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Phone : (M) 7002277812

Ref. No.- *LOKDC/*

Date:

NOTICE

Regarding Admission of Puspalata Das Girls' Hostel

02-02-2026

Interested students (Girl) are hereby asked to submit the **prescribed application form (attached herewith) on or before 15th February, 2026** for hostel.

N.B.- Seat limited.

Documents to be attached along with the prescribed application form-

1. **Copy of Admission receipt,**
2. **Aadhaar Card / Voter ID (any one),**
3. **Copy of the front page of Bank A/c passbook.**

(Dr. Sukdev Adhikari)
Principal
LOKD College, Dhekiajuli

Principal
L. O. K. D. College
Dhekiajuli : Sonitpur (Assam)

LOKANAYAK OMEO KUMAR DAS COLLEGE, DHEKIAJULI

APPLICATION FOR HOSTEL ADMISSION

Admitted,
Block ..... Room No. .....
..... Hostel.
LOKD College
Date ....
Superintendent

Passport size Photograph

1. Student's name in full (in block letters) .....
2. Class ..... (Arts/Science) Roll No. ..... Major in .....
3. (a) Last Board/Council/University Examination passed .....
   Division ..... Total marks/credit point .....
   (b) Date of admission in the college .....
4. Father's / Legal Guardian's name (in full) .....
   (a) Occupation ..... Tel. No. (if any) .....
   (b) Address (i) Vill / Town ..... (ii) Post Office ..... (with pin-code)
   (iii) Police Station ..... (iv) District .....
   (v) State .....
   (c) Relationship with legal Guardian .....
   (d) Student's Email ID .....
5. Local Guardian's name (in full) .....
   (a) Occupation .....
   (b) Address (i) Town ..... (ii) Ward No. .....
   (iii) Road's Name ..... (iv) Post Office .....
   (v) Telephone No. .....
   (c) Relationship with local Guardian .....
6. Religion, caste or creed .....
7. Blood Group .....
8. In case of old boarder where resided last session .....
9. Any special qualification e.g. Co-curricular activities .....

The above information as given by me are coerrect to the best of my knowledge and belief.
If any misrepresentation of fact is detected I shall be liable for any punishment.

Date .....

.....
Full Signature of the applicant

I agree to remain as the Local Guardian of Shri/Smti .....
..... and also assure to intimate the Superintendent immediately if there is any change of my address.

Date .....

Full Signature of Local Guardian
in presence of the Hostel Superintendent