



राष्ट्रीय प्रौद्योगिकी संस्थान मिज़ोरम

NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM

(An Institution of National Importance under Ministry of Education, Govt. of India)

चलत्लांग, आइज़ोल, मिज़ोरम / CHALTLANG, AIZAWL, MIZORAM – 796012

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CONSENT/DECLARATION FOR MESS BILL

1. I, _____ (Student Name), S/o/D/o Shri/Smt. _____
Aadhar Card No. _____ Institute Roll/Enrolment No. _____
(if allotted), hereby declare that if I leave the hostel premises (after hostel allocation) during the semester without prior information to and approval from the concerned Hostel Warden(s), my full mess attendance shall be counted for the entire period of my absence.
2. I shall also be responsible for any leave of absence from the hostel, and will inform the concerned Hostel Warden(s)/Dean (SW) and apply for leave through the ERP portal, even in cases where I have obtained permission from any other authority of the Institute for any reason.
3. I take sole responsibility for any mess bill generated in my name if I do not request a correction within five (5) days from the date on which the mess bill is generated. This includes any corrections related to the mess bill that could have been raised within the prescribed correction period.
4. I further undertake that I shall not claim any exemption, rebate, refund, or adjustment in the mess bill for the period during which I remained absent from the hostel without duly informing and obtaining prior permission from the concerned Hostel Warden(s).
5. I understand and accept that this declaration is binding and that the records maintained by the hostel administration shall be treated as final for mess billing purposes, and that this consent shall remain valid until the successful completion of my B.Tech/M.Tech studies at NIT Mizoram.

Student's Signature

Parent's/Guardian's Signature

Name:

Aadhar No.:

Date:

Name:

Aadhar No.:

Date:

Consent and Undertaking Regarding Clearance of Outstanding Dues, Including Post Completion of Course

I, _____ (Student Name), son/daughter of _____ currently enrolled in _____ (Course Name), bearing Roll No. _____, do hereby solemnly declare, acknowledge, and undertake the following:

1. Responsibility for Payment of Dues:

I acknowledge that I am solely responsible for the timely payment of all fees, charges, fines, and other financial obligations payable to the institution in connection with my admission, enrolment, academic program, hostel accommodation, mess facilities, examinations, library services, transportation, laboratory usage, or any other facility, service, or activity provided by the institution.

2. Acknowledgment of Outstanding Dues:

I understand and agree that any amount remaining unpaid, whether in whole or in part, shall constitute an outstanding due payable by me. Such dues may include, but are not limited to, tuition fees, admission fees, hostel fees, mess charges, examination fees, library dues, laboratory charges, transportation charges, penalties, fines, damages, interest (if applicable), and any other charges levied in accordance with the institution's rules, regulations, policies, and notifications issued from time to time.

3. Liability Beyond Course Completion:

I expressly acknowledge and agree that my obligation to clear all outstanding dues shall continue notwithstanding the completion of my course, graduation, withdrawal, discontinuation, suspension, expulsion, migration, transfer, or cessation of my status as a student of the institution. Any unpaid amount shall remain recoverable from me until fully settled.

4. Withholding of Academic and Administrative Services:

I understand that in the event of non-payment of any outstanding dues, the institution may, in accordance with its rules and applicable regulations, withhold or defer the issuance of academic records, mark sheets, grade cards, certificates, provisional certificates, transcripts, migration certificates, degrees, no-dues certificates, placement-related documents, or any other institutional service or benefit until all dues are cleared.

5. Recovery of Outstanding Dues:

I further agree that the institution shall have the right to initiate appropriate administrative, financial, or legal proceedings for the recovery of any outstanding amount due from me. I undertake to cooperate fully in such matters and shall be liable for all recoverable dues in accordance with applicable laws, institutional policies, and contractual obligations.

6. Accuracy of Information and Continued Obligation:

I undertake to keep the institution informed of any change in my contact details, including address, telephone number, and email address, until all dues payable by me have been fully discharged. I acknowledge that failure to receive any communication regarding dues shall not absolve me of my responsibility to make payment.

7. Voluntary Consent and Undertaking:

I confirm that this declaration and undertaking is executed by me voluntarily, without any coercion, undue influence, or misrepresentation. I have read and understood the contents of this document and agree to abide by all terms and conditions stated herein.

I hereby undertake to clear all present and future dues payable to the institution and acknowledge that my liability shall continue until full and final settlement of all outstanding amounts.

Student's Signature:

Date: