

International Hostel Admission Form, 2026

1 Seater Premium Suite	2 Seater Suite	2 Seater Premium	2 Seater
3 Seater	4 Seater	5 Seater	Dormitory
2. Gender: Male Fema 5. Mother's name (in block letters) 6. Father's name (in block letters) 7. Permanent address Police Station Student Contact No.: Email ID:	ale 3. Semester) City	4. Program/Course	
Address Police Station	District	State	Pin code
9. Visitors allowed to visit the students a)		Relationship	
10.Medical History : (as applicable a) Chronic Illness : Y N		b) Allergic to any medicine	e: YN If yes,
Type of illness		Name of medicine	
HOSTEL DECLARATION			
 In case of my failure to abide by the fit and proper. I will be liable for any damage that I shall not indulge in any unlawful Hostel is allotted on a yearly ba If I, after having resided in the hoyears), under any circumstance I will inform about Continuation/Di Hostel fee is non-refundable an I am signing this declaration aft 	e Hostel Rules, as amended from may occur during my period of sactivity. sis and once I take the hostel abstel, decide to leave it at any ties, I will be liable to pay the full scontinuation of stay in hostel for d non-adjustable in nature. er taking the consent of my paning of Ragging which is a pur	stay in the hostel. admission, I am liable to stay in the time during the course of my study at I Hostel fee for that year, at the time subsequent year within the time framarents/local guardian.	AT THE UNIVERSITY HOSTEL. ction as the competent authority may deem e hostel for a period of at least one year. It the University (1st year or subsequent e of withdrawal, before vacating my room. The fixed by the University, from time to time. The Land and also I am fully aware of the
Signature of Parent/Guardian	Signatu	re of the Local Guardian	Signature of the Student
———— FOR OFFICE USE ONLY ——————			
Allotted: Hostel:			Fee Receipt No.:
Forwarded by Admission Department: Name:			
Hostel Committee :	- 9		
1. NameSignature		Signature	Date
	NameSignature		
	Signature		