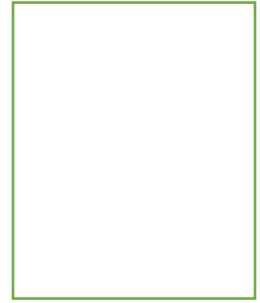


APPLICATION FORM FOR HOSTEL ALLOTMENT

1. Name of student _____
2. Father's Name _____
3. Father/ Guardian's Contact No. I _____
4. Father/ Guardian's Contact No. II _____
5. Domicile (attach a copy): _____
6. Address _____
7. Blood Group _____
8. Specific Medical Condition (If any) _____



LIST OF VISITORS (FOR GIRLS)

Sr. No	Name	ID Card Number (attach attested copy)	Mobile Number	Relation	Picture
1.					
2.					
3.					

Signature of Parent/ Guardian

Signature of Student

FOR OFFICE USE

Accepted/ Not Accepted _____