

FT/GN/47A /00/13.06.17

SRI VENKATESWARA COLLEGE OF E3NGINEERING

HOSTEL ADMISSION FORM

I YEAR	II YEAR	III YEAR	IV YEAR
Room No:	Room No:	Room No:	Room No:

1. Name of the Applicant
2. Course year of joining Branchcollege I.D. No
3. Name of the Parent/ Guardian
Occupation
Residential Address
Telephone No
Cell No (Student)Cell No (Father)Cell No (Mother)
4. Name of the local Guardian if any)
Occupation
Residential Address
Telephone No Cell No Cell No.
5 Blood Group Allergy to any specific drugs to be indicated
6. Any specific medication being followed:
7. Medical problem if any:

DECLARATION AND UNDERTAKING

- ➤ I hereby state that all the above statements are true to the best of my knowledge and belief. I will update the above details and when they change.
- > I shall abide by the hostel rules in force at any point of time.
- > I accept to abide by the disciplinary action imposed by the Hostel authorities.
- ➤ I accept to pay the administrative charges, repair and maintenances charges as levied by hostel management
- > I am aware that this allotment is valid for a particular academic year only and further yearly allotments will depend on satisfactory academic performance and discipline

- ➤ I will not involve in any anti-social activities (Lr.No.7172/SA 3/2014 Dated 11.02.2015) in and out of the hostels & college. If found, I am liable to be expelled from the hostel and college. (Declaration has to be submitted).
- > I shall be responsible for the safe custody of the items provided in my room.
- > I assure that I will bear all liability in case of any damages occurring to the items in the hostel
- Any valuables things are to be kept securely. The management is not responsible for any loss/theft of the valuables.
- > I assure that my son / ward will abide by the Hostel rules and regulations.

Signature of the Student

Signature of the Parent / Guardian

Signature of the Warden with date

SRI VENKATESWARA COLLEGE OF ENGINEERING - HOSTEL

UNDERTAKING

I hereby undertake to stay in the college Hostel during my entire period of study I will not vacate from the hostel in the middle of the program I shall abide by the hostel rules as in force at point any time

Name of the student:

Room No:	
Branch & Year:	
Year of admission:	
Signature of students	Signature of Parent
COPY OF EVIDENCE FRO THE FO	LLOWING TO BE ENCLOSED
8. MEDICAL FITNESS CERTIFICATE	:
9. PHYSICALLY CHALLENGED	:
10. AADHAR NO	:
11. PAN No.	:
12. BANK DETAILS (LIVE)	:
SAVINGS BANK ACCOUNT NUMBER	:
IFS CODE	:
NAME OF THE BANK	:
BRANCH	: