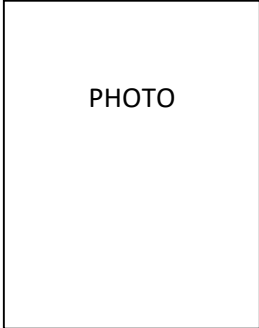




**APPLICATION FOR ON-CAMPUS RESIDENCE FACILITY 2018-19**

1. Name: .....
2. Father's Name: .....  
Telephone (with STD code) Residence .....  
(M) ..... (Office) .....
3. Mother's Name: ..... Occupation: .....  
Telephone (with STD code) Residence ..... (M) .....  
(Office) .....
4. Home Address: .....
5. Postal Address of Father /Mother (if different from the above): .....
6. E-mail address of Father .....  
Mother .....
7. Name of Local Guardian: (if any) ..... Occupation: .....  
Telephone: Residence ..... (M) ..... Office .....
- Exact Relationship: .....
- Address: .....
8. a) Any specific medical condition or history that the Institute should be aware of (attach additional sheet if necessary) : .....
- b) Blood Group: .....
9. Name of any relative among faculty or current student and exact relationship: .....
10. UNDERTAKING:
  - a) I understand that hostel admission will be done on submission of fee by allottees immediately after allotment is done, within 3 days of allotment of seat by NCHMCT failing which my allotment (if made by NCHMCT) may be treated as cancelled and my seat may be offered to any other student.
  - b) In case I am allotted the hostel by NCHMCT and I do not take accommodation, I am liable to deposit a fine of Rs. 3000/- (Three thousand).
  - c) I have visited the hostel and happy with the facility available.
  - d) I shall take the accommodation for the full academic session i.e. two semesters, failing which my security deposit of hostel fee be forfeited.



\_\_\_\_\_  
Signature of Applicant  
Name in Block Letters

\_\_\_\_\_  
Signature of Father / Mother