

HOSTEL APPLICATION FORM

(To be filled in by the applicant in
his/her own handwriting clearly and carefully)

I son/daughter
of
has taken admission in D Y Patil deemed to be University, School of
parents/local guardian Mr. /Mrs.
After consent of my parents I agree to all the terms & conditions of the Hostel & wish to
book a room for myself.
I hereby agree that I have read and will abide by the Rules and Regulations of the hostel
in force from time To time. Ifurnish the following particulars:

Personal Data :

1. Full Name (with Surname) :
2. Residential Address :
3. Email :
4. Phone No :
5. Date of Birth :
6. Nationality :
7. Admission taken in :
8. Religion :

I declare that the information given above is true to the best of my knowledge.
I agree that if any information furnished above found incorrect my admission is
liable to be cancelled.

Date:

Signature of the Applicant

Family Background

1. Full name of the Parent/Guardian
2. Relationship

3. Occupation Designation

4. Office Address

Email Contact number

Nearest Local Guardian

5. Name and address of contact person who should be contacted
(in case of emergency)

1. Name

2. Address

..... Tel. No. (Mob / Res)

1. Name

2. Address

..... Tel. No. (Mob / Res)

I request you to admit my ward Mr/Ms.

To the D Y Patil Deemed to be University Hostel. I give an undertaking that he / she has read and will observe all Rules& Regulation of the Hostel.

Yours faithfully

Date

Signature of Parents

Date

Signature of Local Guardian

EMERGENCY CONTACT
