

Form No.



SYMBIOSIS SOCIETY, NAGPUR CAMPUS
HOSTEL APPLICATION FORM
ACADEMIC YEAR 20.....-20.....

AFFIX
LATEST
PHOTO
HERE

Instruction :

- ✦ Please fill in all the section using BLOCK LETTERS
- ✦ The student & parents must sign this form.
- ✦ Incomplete form will not be accepted
- ✦ This form is valid only for the current Year

BOYS / GIRLS	
HOSTEL	A / B / C / D / E / F / G Wing Hostel (✓ Please Tick)
ROOM NO.	
INSTITUTE	
COURSE	
BATCH	20 - 20

STUDENT'S DATA

PRN NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FIRST NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MIDDLE / SURNAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

DATE OF BIRTH

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

BLOOD GROUP

--	--	--	--

STUDENT'S CONTACT NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

STUDENT'S EMAIL ID

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

VEHICLE DETAILS

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

FATHER'S NAME

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CONTACT NO.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EMAIL ID

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

MOTHER'S NAME

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

CONTACT NO.

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EMAIL ID

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NATIONALITY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PAST MEDICAL HISTORY / UNDER GOING ANY TREATMENT:-

COVID-19 VACCINATED DOSE-1 DATE = _____ DOSE-2 DATE = _____

ADDRESS OF PARENT'S FOR CORRESPONDENCE

COUNTRY														ZIP/ PIN CODE NO.					

UNDERTAKING BY LOCAL GUARDIAN (LG)

This is to certify that I know Mr. / Ms. _____ of _____ Very well for past _____ years / months. I shall be thankful if you would accommodate him / her Symbiosis Society Nagpur Campus, I Shall be responsible for his / her conduct.

Name of LG : _____

Address of LG : _____

Contact No. of LG : _____

E- Mail ID of LG : _____

1. _____

2. _____

Signature of the Parents

Signature of the Local Guardian

WRITTEN DECLARATION BY STUDENT

I, the undersigned hereby agree, without any compulsion, to abide by the following rules and regulations, subject to which my admission to Symbiosis Society Nagpur Campus is based.

1. I will pay the annual hostel fees as per intimated schedule.
2. I will strive to promote mutual understanding and co-operation among students of various cultural backgrounds.
3. I will not encourage entertaining any undesirable element within the entire campus of Symbiosis Nagpur. In the event of violation of any rules or regulation mentioned above, authorities concerned have the full right to evict me from any of the rooms occupied by me from the hostel within the jurisdiction of Symbiosis.
4. I have read the Symbiosis International (Deemed University) Hostel rules and regulations currently vogue and I agree to abide by them, failing which I shall be liable for disciplinary action including rustication.
5. I am fully aware that ragging in any form is prohibited by law and is punishable under UGC regulations.
6. I hereby declare that the information given in this form is true and correct to the best of my knowledge and belief.

Signed in the presence of -

Yours faithfully,

Signature of Father

Signature of Mother

Signature of Student

Date

Signature of Warden

Signature of Campus Administrator