

**INSTITUTE OF HOTEL MANAGEMENT CATERING AND NUTRITION, GURDASPUR**

**HOSTEL ALLOTMENT FORM**

Name of the Student	:	_____	
Father's Name	:	_____	
Date of Birth	:	_____	
Address (Permanent).	:	_____	
	:	_____	
& Phone No	:	_____	Pin Code _____
Correspondence Address	:	_____	
	:	_____	
& Phone number	:	_____	Pin Code _____
Parent's e-mail ID	_____	Student's Blood Group	_____

**DECLARATION**

- a) We hereby declare that the information given in the application is true. I/my ward stand to be disqualified from being admitted to the Institute's Hostel in the event of we being found to have willfully suppressed or have rendered false information.
- b) I/my ward hereby agree to abide by the Rules & Regulations of the Hostel as laid down in prescribed form/ student Hand Book and other amendments made therein from time to time for proper conduct & discipline of the students.
- c) I have received a copy of Rule book.
- d) I have permitted my ward Mr./Ms. \_\_\_\_\_ to stay in the Hostel. I will be responsible for the payment of the fee and dues.
- e) In case of any change in the contact details, we shall be responsible to communicate it to the Academic desk and Hostel Warden failing which we shall be responsible for any consequences arising thereof.
- f) If at any stage, in the case the declaration is found to be untrue, I/my ward have/has indulged in any sort of ragging or misconduct, I/my ward's candidature could be cancelled and if admitted could be expelled, besides other disciplinary action.

(Signature of Student)  
Name in Block letters \_\_\_\_\_

(Signature of Parent/Guardian)  
Name in Block letters \_\_\_\_\_

**FOR OFFICE USE ONLY**

Semester : \_\_\_\_\_

<b>Room No. Allotted :</b>
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Receipt No. \_\_\_\_\_

Cashier

Warden

\_\_\_\_\_  
Principal