

National Institute of Epidemiology (ICMR)

AYAPKKAM, CHENNAI - 77

Application Form for Hostel Accommodation for M.Sc Students

1. Name of the Student :
(In block letters)

2. Academic year: 20 __ - 20 __

3. Year in which studying:

4. Gender:

5. Date of Birth: __ / __ / ____

6. Blood group:

7. Major ailment if any:

Passport size
photograph

8. Name & Address of PARENT :
(In block letters)

Phone with STD. Code / Mobile No.:

7. Name of the Local Guardian :

Address :

Phone / Mobile No : _____

DECLARATION BY THE STUDENT

I have gone through all the provisions contained in the rules and regulations thoroughly and will abide these rules and regulations.

I certify that the information given above are true and correct. If my conduct, during my stay found unsatisfactory, due to my negligence, misbehavior & indiscipline, I agree that I will abide by the decision taken by this office. I will immediately vacate the hostel if ordered to do so.

(Signature of the student with date)

DECLARATION BY THE PARENT/ GUARDIAN

I have permitted my son / daughter to join the hostel of the institute and I shall be responsible for his conduct and discipline as laid down in the Hostel rules and regulations. I also state that the details given by him/her in this application are correct. I will be personally responsible for the payment of all the hostel fees etc.

(Signature of the parent / Guardian with date)

FOR OFFICE USE

Local Guardian met: Yes / No

Hostel Admission: Granted / Not Granted

Name of State belonging to:

Room No Allotted _____

Warden

Sr. Administrative Officer

Director