**BIT SINDRI**

**HOSTEL ADMISSION FORM**

1. Name of the boarder ……………………………………………………………………………………

Paste Passport size color photo

1. Branch and Semester…………………………….……………………………………………………
2. Roll No. ……………………………………. Blood Group……………………………………………
3. Date of Birth………………………………………………………………………………………………..
4. Medical History (if any)……………………………………………………………………………….
5. Father’s Name…………………………………………………………………………………………….
6. Address for correspondence………………………………………………………………………

……………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………

Phone No…………………………………………….. Mobile No……………………………………

1. Local Guardian

Name……………………………………………………………………………………………………………

Address………………………………………………………………………………………………………..

Phone No………………………………………………Mobile No……………………………………..

1. Parents Mobile No. Father……………………………. Mother…………………………..

**UNDERTAKING**

1. That I will not own/drive motor vehicle in hostel and college premises during my stay at hostel.
2. That I will not go/visit to the Damodar river area/village/Basti during my stay at hostel.
3. That I will not use/keep alcohol/nicotine at any occasion during stay at hostel
4. That I will always follow the guidelines provided by Govt. of India / State Govt. / Institute related to Covid-19
5. That I will not keep motor vehicle in the hostel premises.

If at any stage, I am found to violet the any of the above undertakings; my hostel allotment should be cancelled and will attract a fine of Rs. 5000/10000 (as the case may be) as per the hostel/Institute rules and regulations. I will follow rules and regulations of the hostel.

Date: Signature of Student

**DOCUMENTS TO BE SUBMITTED BY THE STUDENTS AT THE TIME OF HOSTEL SHIFTING**

1. Transaction No. /Date/Bank/UPI details/mode of Payment of Hostel maintenance fee of Rs. 7500/-..……………………………………………………………………………………………………………………………………
2. Transaction No. /Date/Bank/UPI details/mode of Payment of Accounts Officer, Electricity of Rs. 2500/- …………………………………………………………………………………………………………………………………….
3. Receipt No. / Letter No. of Negative Covid-19 report-RAT/RTPCR…………………………………………………
4. Consent letter of Parents /Guardian ………………………… Yes/No
5. Certificate of Vaccination ………………………………………... Yes/No

Date: Signature of Student