

THE ICFAI FOUNDATION FOR HIGHER EDUCATION

Donthanapally, Shankerpally Road, Hyderabad - 501203

Hostel Allotment Request Form

Admit Card No.

1234567

Enrolment No.

001

Latest
Passport
size colour
photograph
(Paste - DO
NOT STAPLE)

Student's Name

SahilKadu

Father's Name

Robert Doe

Mother's Name

Mary Doe

Admission Year

1

Blood Group

A+

D.O.B.

2000-01-01

Present Residential Address

Hyderabad

Contact No (Resi/Mobile)

9579613805

Email Address of Father

father@gmail.com

Email Address of Mother

father@gmail.com

Email Address Student

sahilkadu0101@gmail.com

Name of Local Guardian

Guardian

Local Guardian's Residential Address (Hyderabad)

Hyderabad

Contact No (Resi/Mobile)

9878676545

Email Address of Guardian

guardian@gmail.com

WE HEREBY STATE THAT ALL THE ABOVE INFORMATION IS TRUE TO THE BEST OF OUR KNOWLEDGE

SIGNATURE OF STUDENT

SIGNATURE OF PARENT/GUARDIAN

For Office Use Only

Room No:**Block****Key No.****Mess****Date of Allotment****Alloted by**

(name)

(Signature)

Undertaking (To Be Signed By The Student)

1. I have read all the rules and regulations of the hostel and shall abide by them in letter and spirit. I shall also abide by the rules as modified or framed in future from time to time.
2. I shall never indulge myself directly or indirectly in future in any type of Ragging activity.
3. I shall not get involved in any Union/Group/Forum formation in Hostel/University to challenge the authority.
4. I shall not involve in any confrontation/fight/quarrel/discipline activity in the hostel and the university.
5. I shall pay the Accommodation charges, Mess bills and other charges as per the specified dates. If I fail to do so, I will abide by the rules and regulations about penalty.
6. I shall follow all the directions given from time to time by the hostel authority during my stay in hostel.
7. This undertaking abides me for my entire stay in Hostel.
8. I understand that the decision of the Hostel administration in any of the above matter/issues will be binding on me and shall fully respect the same.
9. I shall not bring or co-operate with others in bringing the banned substances as well as items like cigar, alcohol etc., inside the campus.

Date:

Place:

Name of the Student:

Student Mobile Number:

Signature:

Checklist for Hostel Room Allotment

S No	Particulars	Tick
1	Duly filled in and signed hostel allotment request form	<input type="checkbox"/>
2	Annexure IV - IFHE Hostel Rules & Regulations 2018	<input type="checkbox"/>
3	Annexure IVA - Undertaking of the Parent	<input type="checkbox"/>
4	Annexure IVB - Undertaking by Parent/Guardian	<input type="checkbox"/>
5	Annexure IVC - Undertaking by Parent (For Hostel Residents only)	<input type="checkbox"/>
6	Annexure IVD - Undertaking by Student	<input type="checkbox"/>
7	1 passport size self attested photograph of Mother	<input type="checkbox"/>
8	1 passport size self attested photograph of Father	<input type="checkbox"/>
9	1 passport size self attested photograph of local guardian	<input type="checkbox"/>
10	1 copy of photo ID of local guardian attested by Parent	<input type="checkbox"/>

