INDIAN STATISTICAL INSTITUTE

203, B.T. Road, Kolkata- 700108

HOSTEL ACCOMMODATION APPLICATION FORM

(to be submitted to the Hostel Warden, ISI)

Name:	Roll No.:	Male/Female:
Programme:	Academic Year:	ID No.:
Passport No:	Aadhaar No:	
Date of Birth:	Nationality:	
Phone No.:	_ Email ID:	
Permanent Address:		
Residential Address:		
Medical Illness (If any):		
Medical Insurance Policy Details (inclu	ide as many as applicable): ISI/ Others	:
If Others: Comp. Name:	Policy No.:	Expiry Date.:
PERSON TO CONTA	ACT IN CASE OF EMERGENCY (IN KO	LKATA)
Name:	Relationship:	
Phone No: (Mob).	Phone No: (Land line)	
Address (incase different than perman	ent address given above):	
	INDEDTAVING	
I agree to abide by the Hostel Rules in letter an action including expulsion from the Hostel / It three days from the last date of final examination	nstitute. I shall vacate the hostel and hand ove	er possession of my room withir
Date: Signatu	re of the Applicant:	
Warden's Comment		
To, A.O. Hostel, Please take necessary	y Action	
Date:		(Warden, ISI Hostel)
A.O. Hotel's Comment		
Room is available / not available.		
Name of Hostel:	Roo Money) & Rs. /- (Hostel Room	m No.:
	the following A/c no. of the Institute after the	
Bank Name: INDIAN BANK	the following fire no. of the institute after the	approvar of Boar of Stadies.
Account No.: 20571463899 IFSC Code: IDIB000D682	(A.O., Hostel	/ Authorized Signatory)
Dean's Comment		
Date:		(Dean of Studies)

- Note 1: Take one photocopy of this form before submitting in CASH SECTION for the purpose of the Hostel Office.
- Note 2: Take payment transaction document for the purpose of the <u>ISI CASH SECTION</u>.

 Note 3: After collecting the payment receipt from <u>ISI CASH SECTION</u>, you should submit the photocopy of the payment receipt (not original) along with the photocopy of this form to the <u>Hostel office</u>.)