



भारतीय प्रौद्योगिकी संस्थान हैदराबाद  
Indian Institute of Technology Hyderabad

**Indian Institute of Technology Hyderabad  
Kandi, Sangareddy – 502285 Telangana  
INDIA**

Phone: 040 2301 6388, Email ID: office.hostel@iith.ac.in

**Hostel Accommodation Form**

1. Full Name (Block letters): \_\_\_\_\_

2. Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Pin: \_\_\_\_\_ Ph: \_\_\_\_\_

Student Mobile: \_\_\_\_\_

Student Roll No: \_\_\_\_\_

3. Date of Birth (DD:MM: YY): \_\_\_\_\_ 4. Nationality: \_\_\_\_\_

5. Sex (male/female): \_\_\_\_\_ 6. Blood Group: \_\_\_\_\_

7. Highest Qualification: \_\_\_\_\_ 8. Physical disability (if any): \_\_\_\_\_

9. Course & Department: \_\_\_\_\_ 10. Existing Pre-disease: \_\_\_\_\_

11. Date of arrival: \_\_\_\_\_

**One Recent  
Passport Size  
Photo to be fixed  
and one to be  
given along with  
the form**

**Family Details (All in block letters)**

1. Father / Guardian Name: \_\_\_\_\_ 2. Occupation: \_\_\_\_\_

2. Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Pin: \_\_\_\_\_ Ph: \_\_\_\_\_ Mobile(Parent): \_\_\_\_\_

Email ID(Parent): \_\_\_\_\_

3. Name of local Guardian (if any): \_\_\_\_\_

4. Address of Local Guardian with Ph/Mob No: \_\_\_\_\_

I hereby declare that the information given above is true to the best of my knowledge and nothing has been concealed thereof.

Place: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**OFFICE USE ONLY**

Hostel Allotted: Yes/No

Allotted Room No: \_\_\_\_\_

Remarks if any:

Signature of Hostel office



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## Hostel Office

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Telangana, INDIA

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### Occupation Report

Name of the Student:

Date:

Roll No.:

Programme:

Room No.:

Sl. No.	Name of the item	Quantity
1.	Steel Cot / Wooden cot	One
2.	Study Table	One
3.	Chair	One
4.	Hanger rod	One
5.	Curtain rods	One
6.	Ceiling Fan	One
7.	Tube Light set	One
8.	15 Ampere socket	Two
9.	Switches	Six
10.	Fan Regulator	One
11.	Lan Port	One
12.	Room Keys (if any)	

Received the above mentioned items.

Also, I understand that I am jointly responsible with my fellow student roommate for the following common items in the room and for the up keep of the premises. At the time of leaving the hostel accommodation, I will submit No-Dues certificate from concerned faculty.

Signature of the Student

Date:

Hostel Office



## Student Declaration

1. I agree to abide by the rules and regulations of the institute.
2. I will also by the modification in the rules and regulations.
3. I am aware of that I am liable for disciplinary action for any of the rules and regulations of the institute.
4. I will not indulge in ragging of students.
5. I will not indulge in any activities which may cause disturbance in the institute.
6. I will maintain the dignity and sanctity of the institute.
7. I will not keep unauthorized guests in my room.
8. I will settle all my dues in time.
9. I will not consume alcohol or any intoxicating substance in the hostel premises.
10. I will be fully and solely responsible for my acts within the institute and outside the IITH premises.
11. I hereby agree that I will not cause any damage to the hostel property; I accept that failure on my part to abide by this policy may lead to necessary disciplinary action.
12. I will not participate in any activity which has a tendency to disturb peace and orderly life on campus.

Signature of the student:.....

signature of parent:.....

Date:.....

Place:.....