



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी  
**Indian Institute of Technology Guwahati**  
Guwahati - 781 039

Form No.  
Hostel/09

FORM FOR TEMPORARY HOSTEL ACCOMMODATION

FOR SUMMER/WINTER TRAINEES/VISITING STUDENTS/RESEARCH SCHOLARS/PART-TIME STUDENTS /  
OTHER OFFICIAL VISITORS [QIP/Conferences/Interviews etc.]

|    | NAMES OF VISITOR(S)* | Male /<br>Female | INSTITUTION | PROGRAMME & DEPT | DURATION OF STAY |    |
|----|----------------------|------------------|-------------|------------------|------------------|----|
|    |                      |                  |             |                  | From             | To |
| 1. |                      |                  |             |                  |                  |    |
| 2. |                      |                  |             |                  |                  |    |
| 3. |                      |                  |             |                  |                  |    |
| 4. |                      |                  |             |                  |                  |    |
| 5. |                      |                  |             |                  |                  |    |

(\* Pls fill up another form if required)

Forwarded

Signature of concerned Faculty (with seal)

Date:

Email:

HoD / HoC

**Important Note:-**

1. Hostel accommodation is based solely on availability of seats.
2. After approval by Chairman (HAB), room rent is required to be deposited in the HAB A/c. Approval form and fee deposition slip is required to be shown in the hostel, without which no room will be provided in the allotted hostel.
3. For extension of stay, a separate application has to be filled out.
4. Hostel Jr. Supdt/Sr. Asstt./Jr. Asstt. Should insist Xerox copies of Identity card at the time of giving rooms in the hostel.
5. Each hostel room will be provided with an iron cot (without bedding), table and a chair.

**(FOR OFFICE USE)**

|   | Hostel Allotted | Room No.* | Amount of rent (As per norms) | Deposition Challan No. |
|---|-----------------|-----------|-------------------------------|------------------------|
| 1 |                 |           |                               |                        |
| 2 |                 |           |                               |                        |
| 3 |                 |           |                               |                        |
| 4 |                 |           |                               |                        |
| 5 |                 |           |                               |                        |

\* Room No will be provided only by the concerned Hostel Authority (Jr. Supdt/Sr. Asstt./Jr. Asstt.)

Dealing Assistant

Approved/Not approved

Assistant Registrar (SA)

Chairman (HAB)

To:..... Hostel