# AMRITA VISHWA VIDYAPEETHAM

Form 001

# Coimbatore -641 112

#### APPLICATION FOR ADMISSION TO HOSTEL

Name of the School:	Amrita School of Engine	eering/Amrita School of Business (√)	(Affix your recent passport size color
Program	:	Branch :	photograph here)
Name of the student Registration number	: :	Date of Birth:	
Gender	:	Blood group :	
Student Contact no Hostel joining Date	: Medical issues if any: Yes / No :		
Name, Address and I	E-mail ID of the Parent:		
Contact Number of the Address, E mail ID a Details of fees paid	ne parent: 1) nd Contact number of Loc	2) cal Guardian (if any):	Name,
Particulars	Receipt No. and Date	Name of Bank	Amount
Hostel Fee			
Mess Fee			
change therein immed	he details furnished above a iately to the hostel authorit. /hostel related details about	re true to the best of my knowledge and I ies of Amrita Vishwa Vidyapeetham. Also my ward through e-mail/SMS from the Un  Name & Signature of the Parent/O	o, I have no objection in iversity authorities.
		pace for office use only)	
The Student is allotte		Bhavanam H	ostel
on/20	of the academic year 20	020	
Signature of Chief V	Warden		
ID card surrendered v	with tag without tag	This form is valid till//20	

### AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

Form -002

Hostels Application to Vacate the Hostel become day scholar

Name of School:		Date:		
Name of Hostel:				
Hostel First Joined Yea	ar & Month:			
Name & Register no.:				
Reason for vacating:				
Signature of the studen	nt:			
Current address & cont	tact no.:			
Name & Signature of the	he Parent/Guard	ian		
Bank account details in	a case of refund:			
A/c Holder name	:			
A/c Number	:			
IFSC Code	:			
Branch	:			
		(For resident warden use only)		
Student current hoste Current year fee paid		/20 Vacated Date/20		
Hostel Rs	Date:/	/20		
Mess Rs	)ate://	/20		
Signature of Resident	warden with Se	e <b>al</b>		
Signature of Chief Wa	arden			

### AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

Form -003

## HOSTELS

#### Application for Admission to the Hostel for staff

Name:				Date:
Designation:			(Affix your	
Emp. ID:			recent passport size color	
Department:			photograph here)	
Address:				
Proposed date of joining:				
Contact Number: 1)	2)		•••••	
Email ID			••••••	
Name of the Guide:				
Email ID and Contact number of the Guide:				
Signature of applicant with date				
For Hostel office use only				
Type of accommodation given:		Single bath attached room	Single room	Shared room
		Rs. 4500/-	Rs. 3200/-	Rs. 1100/-(4-4) Rs. 2200/- (1-2)
Payment Details:	Through Online	Salary Deduction	ı	
Room No is allotted inBhavanam Hostel.				

**Signature of Chief Warden** 

# AMRITA VISHWA VIDYAPEETHAM

#### **COIMBATORE-641112**

HOSTELS

#### Application to vacate the Hostel for staff

Name:	Date:
Designation:	
Reason for Vacating:	
Department to which attached:	
Hostel Name:	
Proposed date of vacating the hostel:	
Address and Contact Number:	
Signature of applicant with date	
(To be filled by Hostel warden)	
Name	Bhavanam
Hostel on Date/	
Signature of the hostel warden(No Dues):	
Signature of Chief Wouler	
Signature of Chief Warden	

## AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

#### HOSTELS

Hostel Accommodation - Seminar/ Workshop/ Conference/Anokha / Pragati /Annual General Body of Alumni/Convocation/ Sports etc. ( )

Name of the School:	Date:
Name of the Department:	
Name of the Event:	
Is the accommodation chargeable: YES / NO	
Date of the Event:	
Date and time of Arrival:	
Date and time of Departure:	
(Please attach the separate list of the boys and girls) No. of Male students	
No. of Female students	
No. of Male Faculty:	
No. of Female faculty:	
Name and Mobile No. of the Faculty coordinating the accommodation: Faculty 2:	lty 1:
Name and contact number of student coordinator:	
Any other specific requirements	
Name and Signature of the Chairperson of the Department/in- charge of the a	ctivity with date and seal:
(Please attach a copy of approval from authority concerned if the accom-	nmodation is not chargeable)
(For office use only)	

Name of the Hostel for Male:

Name of the Hostel for Female:

**Signature of Chief Warden** 

## AMRITA VISHWA VIDYAPEETHAM

#### **COIMBATORE-641112**

#### HOSTELS

#### **Request for the Hostel Accommodation- Parents/ Guardians**

Name of the Hostel:	I	Bhavanam		
1. Name of the Student	& Reg. No:			
2. Name of the Parent/G	uardian:			
3. Address & Phone No.				
4. Relationship with the	student:			
5. Purpose of the visit:				
Signature of the Student			Date:	
6. Date and time of Arri	val/ Departure			
	I	Date		Time
Arrival				
Departure				
7. Accommodation Char	rges		I	
Type of Room	Tariff	No of da	ys	Amount
8. Food Charges				
Type of Meal	Tariff	No of Me	als	Amount
<ul><li>6. Amount collected: Rs</li><li>7. Receipt No.</li></ul>				
Signature of Resident	Warden			Date:
Note: Hostel accommodation	a ahove two days sh	ould get approval	from the	Chiaf Wardan

### AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

#### **Application to Vacate Hostel for Internship**

Name of School :		Date:
Name of the Hostel:		
Name of the Student with Reg. No :		
Branch and Year of Study :		
Duration of Internship :		
Details of Internship :		
Details of Bank account in case of refu	nd:	
Name of Account Holder	:	
Name of the Bank & A/c No.	:	
Branch	:	
IFSC Code	: :	
Signature and Contact no. of the student	:	
	For resident warden use only)	
Student current hostel Joined Date	.//20 Vacated Date/	/20
Fee Paid Details (2019-2020)		
Hostel RsDate:/	/20	
Mess Rs		
Signature of Resident warden with Seal		

**Signature of Chief Warden** 

### AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

Hostels

## Application to Vacate Hostel for Internship at Amritapuri / Bengaluru campus

Name of School	:	Date:
Name of the Hostel	:	
Name of the Student with Reg. No	:	
Branch and Year of Study	:	
Duration of the internship:		
Internship company details	:	
Date of vacating the Hostel	:	
Vacated date/		
Signature of resident warden		
Hostel/Mess Fee Paid for full year	/ one semester (✔)	
Signature and Contact no. of the stud	lent :	
Signature of Chief Warden		
Signature of Ciner warden		

## AMRITA VISHWA VIDYAPEETHAM COIMBATORE-641112

### Hostels

## **Application to Vacate the Hostel (TC)**

Name of School:		Date:
Name of the Hostel:		
Name & Reg. No:		
Hostel first Joined Year & Mont	h:	
Signature of the Parent:		
Relationship with student:		
Details of Bank account in case	of refund:	
A/C Holder name	:	
A/C Number	:	
IFSC Code	:	
Branch	:	
	(Fo	r office use only)
Student current hostel Joined	Date/	/20 Vacated Date/20
Fee Paid Details		
Hostel RsDate:	//	•••••
Mess RsDate:	//	······
Signature of Resident warden	with Seal:	
		Signature of Chief Warden

**Signature of Chief Warden** 

# AMRITA VISHWA VIDYAPEETHAM

#### **COIMBATORE-641112**

Hostels Application to become day scholar for short-term

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# AMRITA VISHWA VIDYAPEETHAM

#### **COIMBATORE-641112**

**Hostels Application to become hosteller for short-term** 

	Date:
Name of student:	
Roll no.:	
Address & Contact no.:	
Reason:	
Dates on which stay is required: From	to
J I	
Declarate I hereby solemnly affirm that I will abide by all the rules a and amendments from time to time	
Signature of the student:	
Signature of the Father/Mother with Name:	
Office use only	
Disciplinary details:	
Academic performance (Based on CMS report):	
Name of the hostel:	Signature of Chief Warden
	Digitature of Cities Waruen