



HOSTEL ADMISSION FORM

Sl. No.

Bijni College::Bijni, Dist. Chirang, BTR, Assam-783390

(To be filled in by the applicant in his/her own handwriting clearly and carefully)

3 copies of
recent
passport size
Photograph

Admission Payment Receipt Number.....Class.....Roll No.....
Session

Sir,

I wish to apply for accommodation in Hostel for the academic year I hereby declare that I have read and will abide by the Rules and Regulations of the hostel in force from time to time. I furnish the following particulars:

PERSONAL DATA:

- * Full Name
- * Residential Address.....
- * Contact No.
- * Date of Birth.....
- * Nationality.....Religion.....Caste.....Sex.....
- * Blood Group.....

I declare that the information given above is true to the best of my knowledge. I agree that if any information furnished above found incorrect my admission is liable to be cancelled.

Countersigned by the Parent/Guardian

Signature of the Applicant

Date:

Date:

FAMILY BACKGROUND:

- * Full Name of the Parent/Guardian.....
- * Relationship.....
- * Occupation.....
- * Contact No.....

NEAREST LOCAL GUARDIAN

(Name and address of contact person who should be contacted in case of emergency)

- * Name.....
- * Address.....
- * Contact No.

I request you to admit my ward Mr./ Ms./ Mrs.
to the Bijni College Hostel. I give an undertaking that he/ she has read and will observe all Rules & Regulation of the Hostel.

Yours faithfully,

Local Guardian

Date:

OFFICE USE ONLY

Hostel Allotted/Not Allotted

Office Assistant

Signature of Superintendent

Counter Signature by Principal