



RAIGANJ NIGHTINGALE INSTITUTE OF NURSING SCIENCES



At- Gobindapur, P.O- Khalsi, P.S- Raiganj, Dist- Uttar Dinajpur, Pin-733134

HOSTEL ADMISSION FORM

Sl. No.	
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2021-2022

Photo

To,
The HostelWarden

Sir/Madam,

I wish to apply for admission to the hostel from.....to.....I am giving below the necessary information.

1. Name of the applicant (in Block Letter) :

2. Programme/Branch/Class/Semester :

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3. Father's Name :

4. Mother's Name :

5. Allergy to any Medicine if Yes, Please mention :

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6. Date of Birth :

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7. Blood Group :

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8. Email ID :

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9. MobileNo. :

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10. Address of Correspondence (in Block Letter) :

.....

FOR OFFICIAL USE ONLY

Date of Admission in Hostel :..... Room Allotted:.....

Signature of the Hostel Superintendent

Signature of the Hostel Warden

11. PermanentAddress :

				Phone No.:													

12. Name and Address of Local Guardian :

				Phone No.:													

13. Occupation/Designation of:

Father : Mother:

Local Guardian :

14. Name of the relatives/visitor (Other than Parents/Local Guardian) with address and Phone No.

i)

ii)

iii)

14. Whether he/she will travel alone or with the Parents/Local Guardian at the time of Holiday/ of the Institute.

15. In case of emergency, we can contact Mr./Ms./Mrs.....
 at Residence Phone.....Office No.....
 Relationship with you.....

DECLARATION BY THE APPLICANT

1. I have carefully read and understood all the rules and regulations mentioned above. I will follow the rules and regulations and subsequent changes/addition if any as laid down by the Management.
2. I understand that a suitable action can be taken against me if I do not abide by the rules & regulations of the Institute. If I leave the Hostel on my own or I am expelled from the Hostel in the midst of the session, I will not be entitled to claim any refund.
3. I certify that the information above is true to the best of my knowledge and belief. I further declare that anything happens to me or any kind of mishaps occurs outside/inside of the hostel due to my negligence/ fault, the hostel authority will not be responsible for that.
4. I understand that in case of any natural calamities, management will not be responsible for any losses and damages.

Signature of the Student

Signature of the Father/Mother

Signature of the Local Guardian

