



Arunodaya University

(Established Under Section 2(f) of UGC Act, 1956)

www.arunodayauniversity.ac.in

Lekhi Village, Naharlagun, Itanagar, Distt. Papum Pare, Arunachal Pradesh- 791110

HOSTEL ADMISSION FORM

(Session: 20.... - 20....)

Important Instructions

- For applying for hostel, Original Medical Certificate, Identity Proof and all essential documents at the time of Admission.
- No column should be left blank. Write **N.A.** if not applicable.
- All the details should be filled in **Block Capital Letters**

PERSONAL DATA:

- 1) Full Name (with Surname)
- 2) Residential Address
- 3) Pin City..... State.....
(Mobile) Home Tel.
- 4) Email.....
- 5) Date of Birth
- 6) Emergency Phone Number (Parent/Guardian/Local Guardian)
- 7) Course: Batch: Class:
- 8) Food habit of student: Veg.; Non-Veg.
- 9) Details of major illness, if any, during last 3 years:
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Recent Passport
Size Photograph

Restriction on medicine, if any:

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.

Date: Signature of the Parents/Guardian Signature of the student

Arunodaya Hostel

FAMILY BACKGROUND:

- 1) Full name of the Parent/Guardian
- 2) Relationship
- 3) Occupation Designation

- 4) Permanent Address
- EmailTel. No. (Mobile /Res.)

NEAREST LOCAL GUARDIAN (if any)

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

- 1) Name
- Address
-Tel. No. (Mob / Res)
- 2) Name
- Address
-Tel. No. (Mob / Res)

Date:

Signature of (Parents /Guardian)

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(For Office Use Only)
(To be filled up by respective Hostel Warden)

Allotted Room No.

Please accept Rs.....only) as Room Rent. /

Hostel Security and Mess Security, from Mr./Ms.....

Room Rent RsSecurities Rs

WARDEN

Signature of Hostel Incharge

Arunodaya Hostel