Application for the Hostel Allotment Facility

To			Date:
The Registrar Jaypee University, And	oopshahr		
Dear Sir,			
Name of Candidate		Program	
Father's Name		Gender (M/F/T)	
Interested for Hostel (Tick) YES NO	Nationality	
Type of Hostel Accom	modation (Tick) – Triple Sharing with A	AC / Non-AC Room	
Current Address		Permane	nt Address
	t the Hostel Fee for the Semester for one by all rules and regulations pertain		
Health Information of	Candidate:		
. Blood Group	2. Any Drug Sensitivity?		
. Emergency Phone No	0.		(Signature of the Candidate)
			(Signature of the Candidate)
	OFFICE S	ECTION	
Hostel Room Allocatio	on No. Loc	cation (GH/BH)	
Transport nearest Poin	t – Place	Stop	

(Hostel Warden)