

Sophia Shree Basant Kumar Somani Memorial Polytechnic
Bhulabhai Desai Road, Mumbai - 400 026.

APPLICATION FORM FOR HOSTEL ACCOMMODATION

PHOTO

Name in Full (Surname First) _____

Name of Parent : _____ Occupation- _____

Permanent Address: _____

_____ Tel.No.: _____

Place & date of Birth _____
City State Date Month Year

Course Selected: _____

Citizenship: _____ Religion _____

Name & Address of School last attended: _____

Name & address of College/Institution last attended : _____

Name & date of last examination appeared for : _____

Result of the last examination Grade/Marks: _____

What are your major hobbies and extra-curricular interests ; _____

Have you done social service? YES/NO

Are you interested in doing social service? YES/NO

Have your suffered from any chronic ailments? If yes please state details and say for how long : _____

Name of Guardian in Mumbai _____

Address & Tel.No: _____

Relationship: _____ Occupation; _____

For Name and address of other relatives in Mumbai and/or other state, use reverse of form.

This application form should be accompanied by:

- a) **Two recommendations from responsible persons who are not relations**
- b) **A medical certificate of fitness and freedom from any chronic ailment**
- c) **Admission form for the Course selected**

THE SUBMISSION OF THIS FORM BY THE APPLICANT OR ITS RECEIPT BY THE DIRECTOR DOES NOT GUARANTEE ADMISSION TO THE HOSTEL.

IF THE COURSE HAS ALLOTTED MORE THAN 10 DAYS STUDY LEAVE BEFORE COMMENCEMENT OF EXAM, THEN THE STUDENT WILL HAVE TO GO HOME AND COME BACK FOR THE EXAMS.

If selected at the interview, the student will be informed immediately after which she should submit the following to the cashier's office:

- 1) Admission form and fees for the Course selected
- 2) Hostel Enrolment Form

I have read the rules and regulations of the hostel and agree to observe them.

Date: _____

Signature: _____

For office use only

Registration Fee paid on : _____ Interviewed on ; _____ Adm/ Not Adm./W.L _____ Signature : _____

Admission finalised on ; _____ Sig. Director/Warden _____

Hostel Fees 1st Instal. paid on : _____ Receipt No : _____ Sign.of Cashier _____

2nd instal. Paid on : _____ Receipt No : _____ Sign. of Cashier _____