T K M COLLEGE OF ENGINEERING KOLLAM-691005



Affix recent passport size photograph

APPLICATION FORM FOR HOSTEL ADMISSION

Instructions:

- Please fill all boxes/columns properly. Incomplete applications will be rejected.
- Application forms without signatures/recommendations of Senior Advisor and HOD will not be considered.

1	Name in full (BLOCK LETTERS)							
2	Semester, Branch and Roll No.							
3	Age & Date of birth	Gender	M	lale	/Fe	mal	e	
4	Whether belonging to SC/ST/OEC/General (specify caste)		•					
5	Address for correspondence (with PINCODE)							
6	Mobile number of the applicant							
7	Details of Parent							
	Name							
	Relationship with the applicant							
	Occupation of the parent							
	Address of the parent for communication (with PINCODE)							
	Contact Number of parent: (a)Landline (b)Mobile							
8	Details of Local Guardian, if any							
	Name of the Local Guardian							
	Relationship with the applicant							
	Occupation of the local guardian	 						

	Address of the local guardian (with PINCODE)	
	Contact Number of Local guardian: (a) Landline (b) Mobile	
9	Land line/mobile number, in case of any emergency	1. 2. 3.
10	Whether any disciplinary action was taken against the applicant earlier (if so, give details)	
11	Name of Hostel in which the applicant is presently staying (with room number)	
12	Hostel dues clearance (Clearance to be obtained from the present hostel office where the applicant is staying)	
	<u>Declaration</u>	by the Applicant
my s shall will r and o	tay in the hostel. I shall help maintain disc obey all instructions/ actions from the War not leave the hostel without official permiss	regulations and orders of the hostel authorities during ipline in the hostel, and pay my hostel dues in time. I den in all matters related to my stay in the hostel and ion. I declare that all information given above are true that my application will be rejected if any information
Stati	on:	
Date	:	Signature of the applicant
	<u>Declaration</u>	by the Parent
do uno respor the ho	dertake that my ward will abide by his / her one of the consible for all actions of my ward during his sta	other/guardian ofleclaration signed above and assure that I will be ay in the hostel. I know that he / she has to vacate y the Warden in matters related to indiscipline and
Station	:	Signature of the parent/guardian

Date :

Academic Performance of the Applicant in the Previous Semester

Semester	Sessional mark
Roll No.	Out of Percentage

Semester	GPA	No of supplementary papers
I & II		
III		
IV		
V		
VI		

Recommendations of the Senior Advisor and Head of the Department

Recommended/Not Recommended	Recommended /Not Recommended	
(Comments, if any)	(Comments , if any)	
Name & Signature of Senior Advisor	Name & Signature of HOD	
FOR OFFICE U		
Receipt No:	Admitted to:	
Room No.:		

Signature of faculty in-charge of admission

Hostel Accountant/Clerk