

APPLICATION FOR PERSONAL ACCOMODATION

(To be filled in by the applicant in his/her own handwriting clearly and carefully)

ROLL NUMBER: _____



The Director
NIT Meghalaya
Shillong – 793003

Sir,

It is to state that I wish to stay with my parents/ local guardian at the address given below, for the academic year _____.

PARENT'S DETAILS:

1. Name of the Parent: _____
2. Relationship _____ 3. Occupation: _____ 4. Designation _____
5. Address of Communication: _____

6. Tel. No./ Mob.: _____ 7. Email ID: _____

LOCAL GUARDIAN'S DETAILS: (if not staying with Parents)

1. Name of the Local Guardian: _____
2. Relationship _____ 3. Occupation: _____ 4. Designation: _____
5. Address of Communication : _____

6. Tel. No./ Mob.: _____ 7. Email ID: _____

Yours faithfully,

Date: _____

Signature of the Student

DECLARATION BY PARENT IN CASE OF STAY WITH LOCAL GUARDIAN

I hereby give consent to my son/ daughter to stay with local guardian Mr. / Mrs. at the address given above.

Name of the Local Guardian with Signature:

Name..... Signature.....

I hereby declare that the information given by me in Application Form form for Personal Accommodation is true to the best of my knowledge.

I hereby fully endorse the undertaking made by my child/ ward.

Yours faithfully,

Date: _____

Signature of the Parent

1) Proof of residence of Local Guardian/Parent to be submitted along with the form.