



Indian Institute of Technology Hyderabad  
Kandi, Sangareddy - 502285  
Telangana, INDIA  
Phone: 040-2301 6131 Email: hostel@iith.ac.in

**Hostel Accommodation Form**

1.Full Name: \_\_\_\_\_

2.Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Pin: \_\_\_\_\_ Ph: \_\_\_\_\_

Mob: \_\_\_\_\_

Email ID: \_\_\_\_\_

**One Recent  
Passport Size  
Photo to be fixed  
and one to be  
given along with  
the form**

3.Date of Birth (DD:MM:YY): \_\_\_\_\_

4.Nationality: \_\_\_\_\_

5.Sex (male/female): \_\_\_\_\_

6. Blood Group: \_\_\_\_\_

7.Highest Qualification: \_\_\_\_\_

8.Physical disability (if any): \_\_\_\_\_

9.Date of arrival: \_\_\_\_\_

10. Course & Department: \_\_\_\_\_

**Family Details (all in block letters)**

1.Father / Guardian Name: \_\_\_\_\_

2. Occupation: \_\_\_\_\_

2.Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_

Pin: \_\_\_\_\_ Ph: \_\_\_\_\_ Mob: \_\_\_\_\_

Email ID: \_\_\_\_\_

3.Name of local Guardian (if any): \_\_\_\_\_

4.Address of Local Guardian with Ph/Mob No: \_\_\_\_\_

I hereby declare that the information given above is true to the best of my knowledge and nothing has been concealed thereof.

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Hostel Allotted: Yes/No

Allotted Room No. \_\_\_\_\_

Remark if any:

Signature of warden