



भारतीय प्रौद्योगिकी संस्थान हैदराबाद
Indian Institute of Technology Hyderabad

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: _____

(Block Letters)

2. Permanent Address: _____

State: _____ Pin No. _____

Student Mobile No.: _____

Student Email ID: _____

3. Date of Birth (DD: MM: YY): _____ 4. Nationality: _____

5. Sex (male/female): _____

6. Blood Group: _____

7. Highest Qualification: _____

8. Pre-existing disease : _____

9. Date of arrival: _____

10. Course & Department: _____

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

Family Details (all in block letters)

1. Father / Guardian Name: _____ 2. Occupation: _____

2. Address: _____

City: _____ State _____ Pin: _____

Parent/ Guardian Mobile No. : _____ Ph. No.: _____

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



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Hostel Office

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Kandi, Sangareddy - 502285
Telangana, INDIA

Phone: 040-2301 6131, Email: hostel@iith.ac.in

Occupation Report

Name of the Student:

Date:

Roll No. :

Course: B.Tech / M.Tech/ M.Sc / M. Des/ M. Phil / PhD / Any others _____

Room No. :

Emergency Contact No.

Sl. No.	Name of the item	Quantity
1.	Steel Cot / Wooden cot	One
2.	Study Table	One
3.	Chair	One
4.	Hanger rod	One
5.	Curtain rods	One

Received the above mentioned items.

Also, I understand that I am jointly responsible with my fellow student roommates for the following common items in the room and for the up keep of the premises. At the time leaving the hostel accommodation I will submit No-Dues certificate from concerned faculty.

1. Ceiling Fan 1 No.
2. Tube Light sets 1 No./ CFL 1 No.
3. 15 ampere Socket 2 Nos. /3 Nos.
4. Switches 6 Nos.
5. Fan Regulator.
6. Lan port

Signature of the Student
Date:

Hostel Staff



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Student Declaration

1. I agree to abide by the rules and regulations of the institute.
2. I will also obey the modification in the rules and regulations.
3. I am aware of that I am liable for disciplinary action for any of the rules and regulations of the institute.
4. I will not indulge in ragging of students.
5. I will not indulge in any activities which may cause disturbance in the institute.
6. I will maintain the dignity and sanctity of the institute.
7. I will not keep unauthorized guests in my room.
8. I will settle all my dues in time.
9. I will not consume alcohol or any intoxicating substance in the hostel premises.
10. I will be fully and solely responsible for my acts within the institute and outside the IITH premises.
11. I hereby agree that I will not cause any damage to the hostel property; I accept that failure on my part to abide by this policy may lead to necessary disciplinary action.
12. I will not participate in any activity which has a tendency to disturb peace and orderly life on campus.

Signature of the student:.....

signature of parent:.....

Date:.....

Place:.....

DECLARATION

I hereby undertake that I will not possess or consume any a) alcoholic drinks/substance, b) narcotic drugs/substance, or c) any intoxicating drinks/substance in the premises of Indian Institute of Technology Hyderabad (IITH) including hostel. Further, I also undertake not to possess or consume any other substance that may cause effects similar to alcoholic or intoxicating or narcotic substance/drinks.

I understand that the authorities of IITH have right to inspect Hostel Rooms and also my personal belongings at any time of day and/or night.

I fully understand that in case any of the drinks/substance stated in the first paragraph is found in my possession and/or I appear to be under the influence of any such drink/substance, I am liable to disciplinary action.

Name of the student:

Roll No.:

Program:

Department:

Signature:

Name of the parent/guardian:

Address of the parent/guardian: