BITS Pilani, Dubai Campus APPLICATION FOR STUDENT HOSTEL Academic Year - 2021-2022 FRESH APPLICANT Name: Paste photograph _____ PP No _____ M/F Nationality Sex: here Visa Status: BITS/Others, Specify, _____ **Blood Group:** Emergency Contact No & Name: ____ PARENT DETAILS LOCAL GUARDIAN DETAILS Name of the Parent _____ Name of the Guardian Designation: Designation: Address ____ Addre ss Ph (Off): _____ Ph (Off): Ph (Res): Ph (Res): Mobile: Mobile: Email: Email: 1 . What is your Blood Group? 2. Are you suffering from any chronic disease? If yes, details: 3. Are you under any regular medication? If yes, details 4. Are you allergic to any medicine? if yes, details _____ I am aware that any changes in the details provided above will be informed immediately to the Institute. I have read the following documents fully and I confirm full acceptance to the same. a) Terms & Conditions of Hostel Contract b) Anti-Ragging Undertaking I request for providing hostel accommodation. Signature of Student Counter Signature of Parent FOR OFFICE USE The candidate is admitted to_____ and has paid all required fee. His/ Her ID no. is _____ Sr. Manager - Admissions Hostel Allotted Hostel Block: Room No: Signature of Hostel Warden_____ Signature of Chief Warden Date: __