



**UNIVERSITY COLLEGE OF ENGINEERING TINDIVANAM, HOSTELS
MELPAKKAM, TINDIVANAM – 604307**

Office: 04147-224432, Email: hostelofficeucet@gmail.com

APPLICATION FOR HOSTEL ADMISSION

YEAR – 20 - 20

*Affix recent
Passport size
Photograph*

Application No: 20 / ____

Date: dd / mm / yyyy

Hostel Block: ☐ BOYS HOSTEL ☐ GIRLS HOSTEL

Preference of Mess: ☐ Vegetarian / ☐ Non Vegetarian

STUDENT DETAILS (Fill in CAPITAL LETTERS only)		
1.	Name of the Student	
2.	Registration Number	
3.	Branch / Semester	
4.	Date of Birth & Age	dd / mm / yyyy & Age yy / mm / dd
5.	Student Contact Number	
6.	E-Mail ID	
7.	Category (7.5 / Others)	
8.	Community	OC / BC / BCM/ MBC /SC / SCA / ST / Others.
8.	Blood Group	
9.	Medical Illness History (If Any)	

PARENT/GUARDIAN DETAILS ((Fill in CAPITAL LETTERS only)			
	FATHER	MOTHER	GUARDIAN (If Any)
10.	Name		
11.	Occupation		
12.	Phone No		
13.	E-Mail ID		
14.	Address with Pincode		

Signature of the Student

Signature of the Parent / Guardian

DECLARATION BY THE STUDENT

I, hereby declare that the above furnished details are true to the best of my knowledge and assure that I will accept and abide by the rules and regulations of the hostel. If my conduct, during my stay is found unsatisfactory, due to my negligence, misbehavior and indiscipline, I agree that I will abide by the decision taken by the hostel authorities.

Signature of the student

DECLARATION BY THE PARENT/GUARDIAN

I have permitted my ward to join in the hostel of this institution and thereby am responsible for his/her conduct and obedience as laid down in the Hostel rules and regulations and any changes made from time to time. I also state that the details given by him/her in this application are correct. I will be personally responsible for the payment of all the hostel fees etc. payable by him/her on or before the due date. We are aware of the serious consequences of indulgence in ragging and have strictly advised him/her against this pernicious practice. I assure you that my ward will not involve in any of the activities forbidden by the authorities and the government.

Signature of the Parent

Recommended / Not Recommended

Staff Incharge (Admission)

DEPUTY WARDEN

Admitted / Not Admitted

EXECUTIVE WARDEN

(For office use only)

Check list : ☐ TNEA Allotment Order ☐ Aadhaar Card of both Student & Parent / Guardian
☐ Fees Paid Receipt

Date of Admission: dd / mm / yyyy

Admission Number: _____

Page No in Admission Register: 20 - 20 / _____

Allotment Details : **Ground Floor/ First Floor/ Second Floor**

Room No : _____

Amount Paid Rs:_____ Ref. No._____

Date:_____

Hostel Incharge(Admission)

Supervisor

Superintendent

WARDEN



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HOSTEL OFFICE COPY

ADMISSION SLIP

YEAR – 20 - 20

Application No: 20 / _____ Admission Number : _____ Date: dd / mm / yyyy

Hostel Block : ☐ BOYS HOSTEL ☐ GIRLS HOSTEL

Name of the Student :

Department :

Register Number :

Allotment Details : Ground Floor/ First Floor/ Second Floor Room No :

Preference of Mess : ☐ Vegetarian / ☐ Non Vegetarian

Staff Incharge (Admission)

Executive Warden



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STUDENT COPY

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