



VIDYAA VIKAS



COLLEGE OF ENGINEERING AND TECHNOLOGY

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(Approved by AICTE, New Delhi and Affiliated to Anna University, Chennai)

Recognized by UGC under section 2(f) & 12(B) of UGC Act 1956

Fresh Hostel Admission Application for 20 - 20

- 1. (a) Student Name as on Certificate** : _____
 [In **BLOCK** Letters with **Initials** at the End]
- (b) Student Name as on Aadhaar** : _____
- (c) Aadhaar Number** :
- (d) Mobile Number** : + 9 1
- (e) e-Mail ID [Must be Legible]:** _____

Space for
Affixing
Recent
Passport Size
Photograph -
Student

2. Year of Study : I / II / III / IV

3. Name of the Course : B.E. / B.Tech. / MBA / MCA / M.E.

4. Name of the Department [Specify] : _____

5. Gender :

| Male | Female | Trans Gender |
|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. Date of Birth :

| Date | | Month | | Year | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

- 7. (a) (i) Name of the Father** : _____
- (ii) Occupation of the Father : _____
- (iii) Mobile Number of the Father : + 9 1

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Affixing
Recent
Passport Size
Photograph -
Father

- (b) (i) Name of the Mother** : _____
- (ii) Occupation of the Mother : _____
- (iii) Mobile Number of the Mother : + 9 1

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Recent
Passport Size
Photograph -
Mother

- (c) (i) Name of the Legal Guardian** : _____
- (ii) Occupation of the Legal Guardian : _____
- (iii) Mobile Number of Legal Guardian : + 9 1

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Affixing
Recent
Passport Size
Photograph -
Legal
Guardian

- 8. Address for Correspondence / Permanent:** Door No. _____
- _____ **Post,**
- _____ **Taluk,**
- _____ **District,**
- _____ **State.**
- Pin:

- 9. Identification Marks** : 1. _____
 2. _____
- 10. Blood Group** : _____
- 11. Height** : _____ c.m.
- 12. Weight** : _____ k.g.
- 13. Health Issues, if any** : _____
 [Mention kind of special care / Attention is required]

Declaration

Date: / / 20

We do hereby assure to abide by the rules and regulations of the hostel and declare that the above statements regarding my son / daughter _____ are true to the best of our knowledge.



Signature of the Student



Signature of the Parent / Legal Guardian

Hostel Official Use Only

1. a) Application No. : _____
 b) Admission No. : _____
 c) Room No. : _____
2. Mode of Admission Quota : Government Quota / Management Quota / NRI
3. If Enclosed, Photocopy of the Physical Fitness Certificate: Yes / No
4. a) Date of Admission : - -
 b) Time : _____
5. Reason of Leaving : Own Request / Completed the Academic Year
6. a) Date of Leaving : - -
 b) Time : _____

Signature of the Warden
 with Designation Seal

Signature of the Principal
 with Designation Seal