Appasaheb Alias Sa. Re. Patil Institute of Technology

Boys'/Girls' Hostel Admission Form 2026–2027 Room No:

1. Name of the Student: _____

2. Date of Birth: ____ / ____ / _____

3. Gender: ☐ Male ☐ Female

4. Mobile Number: _____

5. E-mail ID: _____

6. Father's Name: _____

8. Father's Mobile Number: _____

9.Permanent Address

10.Local Guardian Details (if applicable)

Name: _____

Signature of Local Guardian: _____

11.Do you have any illness, allergy, or medical condition?
☐ No ☐ Yes (If yes, please specify)

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13. Hostel Fee Details: 20,000/- Per Year

Declaration:

I hereby declare that the information provided above is true and correct to the best of my knowledge. I agree to abide by all the hostel rules and regulations of the institute. I understand that violation of hostel rules may result in disciplinary action.

Student Sign **Parents Sign** **Hostel Rector Sign** **Principal sign**

Remark: