

ASPEE SHAKILAM BIOTECHNOLOGY INSTITUTE

NAU, SURAT-395 007

BOYS/GIRLS HOSTEL LEAVE APPLICATION

(To be filled by boy/girl student while leaving the hostel for night)

1. Name of student.....
2. Registration No.....
3. Room No.....
4. Mobile no: Self Parents:
5. Semester.....Year
6. Dateand timeof leaving the hostel.
7. Reason for leaving.....
.....
.....
8. Dateand time.....of returning the hostel.
9. Where are you going? Write the full address and contact number
.....
.....
.....
.....
10. Have you informed to your parents about leaving the hostel? Yes/No:.....

ASSURANCE BY THE STUDENT

All above information given by me only. I hold myself responsible for any occurrence during the period from leaving the hostel and return. I will come back to hostel on above mentioned date and time. If not so, whatever disciplinary action is taken will be accepted by me.

I have read the above details and assure that I will follow the instructions strictly.

Sign.....

Name.....

Date.....

Permission granted / not granted

Assistant Rector

Rector