

**NATIONAL INSTITUTE OF PHARMACEUTICAL EDUCATION AND RESEARCH,
SECTOR-67, S.A.S. NAGAR (PUNJAB) 160062**

APPLICATION FOR HOSTEL ACCOMMODATION

(To be filled in capital letters)

Name of the student:					Space for Photograph to be affixed
Name of Father/Mother/Guardian:					
Gender : <input type="checkbox"/> Male / <input type="checkbox"/> Female			Nationality:		
Marital status: <input type="checkbox"/> Married / <input type="checkbox"/> Unmarried			Blood Group:		
Any acute/chronic medical/health problem:			Any special food allergy:		
Category			Differently abled: <input type="checkbox"/> Yes / <input type="checkbox"/> No		
Gen	SC	ST	OBC	Others	
Correspondence Address:					
PINCODE:					
Permanent Address:					
PINCODE:					
Parents Contact no's:					
Student Contact No:					
E mail address:					
Department:					
Course: [M.S.(Pharm.) / M. Pharm. / M. Tech. (Pharm.) / MBA (Pharm.) / PhD]					

For Local Guardian (If any): **Name:**

Address:

Phone no:

I declare that the information furnished above is true to the best of my knowledge and in case of any false information found later on, I am liable to be acted upon as per the NIPER rules and regulations. I also undertake to follow the rules and regulations of NIPER hostels strictly. In the event of any change in any of the details given above, I will inform the warden's office promptly.

Place:

Signature of the student

Date:

Signature of Parent/Guardian

Further, I undertake that I am aware of the NIPER policy of ZERO TOLERANCE towards RAGGING and the consequences of indulging in it. And thus I hereby reaffirm that **I will not indulge in** any kind of **ragging** – activities during the course of my stay in NIPER campus.

Signature of the Student

Signature of Parent/Guardian

For Office Use Only:

Session (2021-23)	Hostel Name:	
	Room No.:	
	Single/Double occupancy:	