

APPLICATION FOR CONVERSION TO DAY SCHOLAR

NAME	ROLL NO
DEPARTMENT	COURSE
EMAIL ID	PHONE NO
CURRENT PLACE OF STAY (<input checked="" type="checkbox"/> ONE) <input type="checkbox"/> STAYING IN CAMPUS <input type="checkbox"/> STAYING OUTSIDE CAMPUS	
CURRENT ADDRESS	
PERMANENT ADDRESS	
REASON FOR CONVERSION TO DAY SCHOLAR	
DATE OF VACATING HOSTEL	
IF PERMITTED, GIVE ADDRESS WHERE STUDENT WISHES TO STAY	
IF AT LEAST ONE OF THE FAMILY MEMBERS OR GUARDIANS IS STAYING WITH THE STUDENT IN THE ADDRESS MENTIONED ABOVE, THEN PROVIDE THE FOLLOWING DETAILS	
NAME	EMAIL ID
CONTACT NUMBER	RELATIONSHIP
I UNDERTAKE THAT THE ABOVE INFORMATION FURNISHED BY ME IS CORRECT AND I SHALL ABIDE BY ALL THE GUIDELINES PERTAINING TO THE INSTITUTE RULES AND REGULATIONS	
SIGNATURE OF STUDENT WITH DATE	
SUMMITTED FOR RECOMMENDATION / APPROVAL	
GUIDE / FACULTY ADVISOR WITH DATE	HOD WITH DATE
DEAN ACADEMICS WITH DATE	RESPECTIVE WARDEN WITH DATE
CHIEF WARDEN WITH DATE	DEAN-SA WITH DATE

(DR ACADEMICS)

(REGISTRAR)

(DIRECTOR)

Documents to be attached.

1. Marriage Certificate

2. Current Address Proof