

Form: H6**HOSTEL LEAVE FORM - MEDICAL EMERGENCY/FAMILY CALAMITY**

INDIAN INSTITUTE OF INFORMATION
TECHNOLOGY, DESIGN AND
MANUFACTURING, KANCHEEPURAM



भारतीय सूचना प्रौद्योगिकी, अभिकल्पना
एव विनिर्माण संस्थान, कांचीपुरम

(An Institute of National Importance under MoE, GoI)
Melakottaiyur, Off Vandalur-Kelambakkam Road, Chennai-600127
मेलक्कोट्टैयुर, वंडलूर-केलम्पाक्कमराड़, चेन्नई-600127

Name of the Hostel Inmate:	
Roll no:	
Hostel Name:	
Room No:	
Reason for Leave (Explicitly mention the medical emergency nature*):	
Date of Journey (exit from hostels):	
Return Date:	
Destination (complete address):	
Father Name:	
Father Mobile No:	
Mother Name:	
Mother Mobile No:	
Guardians Name:	
Guardians Mobile No:	
Inmate's Signature:	

*Students are required to submit a medical certificate or fitness certificate upon returning to the institute hostel.

If parents are not comfortable with English, they may send the equivalent message in their native language via text. Hostel Office Phone Number: 8778400261

In case the student is not in a condition to fill out the form, the hostel caretaker will do the needful.

Approval of Hostel Caretaker/Assistant Warden/Warden (Anyone)