

**INSTITUTE HOSTEL LEAVE FORM**

Name of the Hostel Inmate:

Rollno:

Inmates Phone No:

Hostel Name :

Room No:

Reason for Leave:

Date of Journey (exit from hostels):

Return Date:

Destination (complete address):

Parents / Guardians Mobile No:

Father:

Mother:

Guardians No:

Inmate's Signature:

Approval of Wardens:

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In the event of unplanned stays (Rules 4 to 6) text of Message to be acknowledged by parent / guardian:

I ----- Parent / Guardian of ----- hereby acknowledge that my ward has reached my place safely and we take responsibility of his / her well being.

For parents not comfortable with English, they may text the equivalent of above in their native language. HO phone number: 8778400261