

**APPLICATION FOR ADMISSION TO THE GOVT.HOMOEOPATHIC MEDICAL  
COLLEGE MEN'S/WOMEN'S HOSTEL – CALICUT.**

Name in full (In block letters) :  
Admission Number :  
Course : Year/Semester :  
Residence Address :

Religion and Caste : Category :  
Age and Date of Birth :  
Vegetarian or Non Vegetarian :  
Name and Permanent address- of Parent :  
(with contact number)

Name and address with Tel. No of local guardian  
who may be contacted in case of emergency :

**DECLARATION**

I declared that I have carefully read and understood the rules myself. If admitted to the hostel will obey all the rules and regulations of the hostel to help the authorities in the maintenance of good conduct and discipline to get a good example myself to pay my dues punctually and not to leave the hostel unless permitted or directed by the Warden /Chief Warden to do so.

Place: Signature of Applicant.  
Date:

**FOR OFFICE USE ONLY**

The Hostel have/have'nt vacancy to occupy this applicant. I am recommending to proceed with further necessary actions.

Hostel Warden

Fee Details :Receipt Number and Date :

Admitted on :

Section clerk

Chief Warden/Principal

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Copy to Hostel Warden

Mr./Ms ..... had admitted to hostel and  
recorded in Register. He/She had paid fees upto .....

Section clerk

Chief Warden/Principal

Seal