

MEDICAL COLLEGE FOR WOMEN & HOSPITAL

Plot-4, Road-B/9, Sector-I, Uttara Model Town, Dhaka-1230

Student's photo

APPLICATION FOR HOSTEL SEAT

For office only	AU-1	D : 1 1	Distant		
Present seat no:	Allotment date:	Risk bond no: Date:			
First hostel entry date:		Dues clear up to:	Seat cancellation date:		
Previous allotted room/New:		Requesting Room No:			
Name of the student:		Mobile no:			
Father's name:		8	Mobile no:		
Mother's name:			Mobile no:		
Guardian's name:		Mobile no:			
College batch: MCW-	Session:	Registration no	: Present year:		
First year admission roll	no:	Third year roll r	יס:		
Student's present addre	ss:				
Students permanent address:					

Guardian's address:

Marital status (Hostel seats are only for unmarried students. Hostel rule no-36) :

Reason for asking/change a hostel seat (in brief):

Undertaking by the student:

Above information given by me is true. I shall abide by the rules & discipline of the hostel as may be promulgated by the "Medical College for Women" authority from time to time, failing which I shall be liable for disciplinary action as may be imposed upon me.

Signature & Date

Undertaking by the Parents & Guardian:

My above named daughter/ward shall abide by the rules & discipline of the hostel of Medical College for Women, failing which the authority will take the necessary action against my daughter/ward with or without fine.

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Father's Photo	Father's Signature Date:	Mother's Photo	Mother's Signature Date:	Guardian's Photo	Guardian's Signature Date:

Vice Principal

Principal