MES MEDICAL COLLEGE, PERINTHALMANNA

APPLICATION FOR ADMISSION TO MEN'S HOSTEL / LADIES HOSTEL

1. Name of the applicant	:	essently the casts	711
2. Course	:	y ether relevant information	21. An
		rding he ha problem/eilergy	961
3. Gender	: Female	Male	
4. Age & Date of Birth	:		
5. Father's name & Address	MOTTAHAJIRH :		
6. Permanent address with	phone no :		
7. Present address with pho	ne no :		
Residence:	Office:	Mobile:	
8. Address of local Guardian	ı :		
	Dates		
Residence:	Office:	Mobile:	
O Nama & address with pha	of .		

9. Name & address with phone no of: the person to be contacted in case of emergency

10. Do you belong to scheduled caste or scheduled tribe?	:		
If yes, specify the caste	:		
11. Any other relevant information regarding health problem/allergy to any other food or any other arti	: icles		
(Two passport size photographs are a	lso to be produced)		
	DECLARATION		
I information furnished overleaf are true vogue and to any modifications to the s mess and other charges before the stipu	e. I also do hereby agree to a	hereby declare abide by the hostel a time. I shall also p	rules now in
Counter signed by the parent:		Signature of	the student
Name :			
Date :			
Office use only			
Registration charges collected Rs.	Dat	e:	
Applicant is admitted to Room no:			
Warden / Asst.Warden :			
Date :			