



# COMSATS University Islamabad, Sahiwal Campus

Comsats Road off G.T Road Sahiwal  
Tel: 040-4305001-05 Fax No. 040-4305006

## **Warden Office** **Girls Hostel Application Form** Doc#CUI-SWL/HT/Form-01/Rev.002

Please affix a  
passport size  
photograph  
  
Here

Admission Form No.: .....

Have you ever availed CUI Hostel Facility?

 Yes No

Are you availing any scholarship at CUI, Sahiwal?  
(If yes, mention title of scholarship)

 Yes No

### Section A:

### **Student's Personal Information:**

(To be filled by the applicant and must be complete in all aspects)

**Students Name:** (In Capital Letters)


**Father / Guardian's Name:** (In Capital Letters)


**CNIC Number of Student:**

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**Program of Study:**

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**Registration Number:**

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**Permanent Address:**


**Correspondence Address:**


**Personal Contact Number:** .....

**Email ID:** .....

**Father/Guardian Contact Number** .....

**Person's name and phone number to be contacted in case of emergency:**

Sr. No.	Name	Relationship	Contact No.	Postal Address

**Undertaking by the Applicant:**

I..... S/o, D/o ..... do hereby solemnly affirm and undertake that:

- The information given by me as mentioned above is true and complete to the best of my knowledge and nothing has been concealed / suppressed.
- I shall abide by all the rules, orders, instructions, information, guidelines, code, and circulars etc. in-forced by the institution.
- The institutional/hostel management will be at liberty to impose any penalty or any disciplinary action(s) on me being found guilty of any sort of misconduct or indiscipline or disobedience or malpractice within or outside the hostel, or any act which is detrimental to the interest of the institution.

.....  
Signature of Applicant

**Section B:**

(For official use only)

Student File No.: \_\_\_\_\_

Room No.: \_\_\_\_\_

Scholarship \_\_\_\_\_

(if any e.g. ICT, attach the offer letter supporting document):

Hostel Fee:

Semester							
Amount							

.....  
Hostel Clerk/AO

**Hostel Name:** \_\_\_\_\_  
(Complete Address)

**Assistant Warden Name:** \_\_\_\_\_

Date: ..... / ..... / .....

Assistant Warden's Signature: \_\_\_\_\_

Warden Hostels Signature: .....

**Section C:**

**Detail of Visitor authorized to visit the female students in hostel**

(This section must be filled by the father/guardian of the female student staying in COMSATS Hostel)

I \_\_\_\_\_ being the father / guardian of \_\_\_\_\_ authorize Mr./Ms. \_\_\_\_\_ to visit my daughter/sister/..... in the hostel in accordance with procedure specified by the hostel management.

**Father's / Guardian CNIC No.:**

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**Visitor's CNIC No.:**

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**Visitor's Contact No.** \_\_\_\_\_

Visitor's Relationship with the student: \_\_\_\_\_

Date: .... / .... / ..... Signature of the Father / Guardian: \_\_\_\_\_

**Please Note:** CNIC copies of the student, father / guardian and visitor must be attach with form.

*\*Hostel security will be refundable within one year of leaving hostel.*

Affix a passport size photograph of a person authorize to visit the female student.