

UNIVERSITY COLLEGE OF ENGINEERING TINDIVANAM, HOSTELS MELPAKKAM, TINDIVANAM – 604307

Office: 04147-224432, Email: hostelofficeucet@gmail.com

HOSTEL VACATING FORM

YEAR - 20 - 20

-	plication No: 20 / stel Block: □ BOYS HO	_	□ G	IRLS HOSTEL	Date: dd / mm / yyyy
STUDENT DETAILS (Fill in CAPITAL LETTERS only)					
1.	Name of the Student				
2.	Registration Number				
3.	Branch / Semester				
4.	Room Number				
5.	Student Contact Number				
6.	E-Mail ID				
7.	Reason for Vacating Hostel		Year / Course Completion / Transfer / Discontinue / Others		
NO DUES					
	Due / N		o Due	Name & Signature	Remarks
1.	Hostel Damage			Hostel Caretaker	
2	Hostel Fees			Supervisor	
3.	Mess Damage			Hostel Caretaker	
4.	Mess Fees			Supervisor	
5.	Residential Counselor				
Hereby, I acknowledge and declare that I leave the room without any damages up to the best of my knowledge. If the authorities find any further issues, I accept to pay the damage charges as per the hostel norms. Vacating Date: Signature of the Student					
PERMITTED / NOT PERMITTED					

Encl: 1. Caution Deposit Application & Acknowledgement (for Course Completion or Discontinue / Transfer)

Executive Warden

WARDEN

2. Undertaking Form

Deputy Warden