



Application Form Fee Rs. 250/-
Challan No. date

**Mirpur University of Science and Technology (MUST), Mirpur
(Azad Jammu & Kashmir)**

HOSTEL ALLOTMENT FORM

(A) Personal Detail:

Name: Father's Name: Gender:

Permanent Address:

.....

CNIC#: Domicile:

Phone# (Mobile): Phone# (Home):

Guardian Detail (two blood relation) for visit/contact in case of emergency

Sr.#	Name	Relation	CNIC#	Contract #
1				
2				

(a) Female Student only:

- Only the persons specified in the list are allowed to meet
- Visitors mentioned here should bring their original CNIC during hostel visit

(b) Medical Record:

- Are you having any medical problem? Yes/No.
- If yes, please specify the disease you suffering from
- Any medicine being used/check-up regularly?

Signature of Applicant

(B) Departmental Detail:

Name of Department Program

Session Semester: Roll No/Form No.

Sr.#	Name of Exam	Total Marks	Marks obtained	% age
1-	Entry Test/Semester			
2-	B.A./B.Sc.			
3-	F.A./F.Sc.			
4-	Matric			

It is certified that above particular are correct as per office record.

Signature of Chairman/
Admission Committee

Receiving: Hostel

No. date.....

Received by :