



**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT**

**LADIES HOSTEL**

**Application for going home on weekends and holidays (only for first years)**

Name of Student:		
Course: B.Tech <input type="checkbox"/> M.Tech <input type="checkbox"/> M.Sc <input type="checkbox"/> MBA <input type="checkbox"/> MCA <input type="checkbox"/> PhD <input type="checkbox"/>		
Roll No:		
Hostel: LH <input type="checkbox"/> MLH <input type="checkbox"/>		
Room No:	Block/Floor:	
Date of Leaving:	Date of Return:	Duration of Leave:
Time of Leaving:		
Mode of transport for Leaving (Specify):		
Purpose of Leave:		
Phone No:		
Address in which you will be in your leave period:		
Parent's Phone Number:		
Signature of the student with date:		
Remarks & Signature of Resident Tutor:		



**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT**

**LADIES HOSTEL**

**Application for leave (for going home for more than two working days)**

Name of Student:		
Course: B.Tech <input type="checkbox"/> M.Tech <input type="checkbox"/> M.Sc <input type="checkbox"/> MBA <input type="checkbox"/> MCA <input type="checkbox"/> PhD <input type="checkbox"/>		
Roll No:		
Hostel: LH <input type="checkbox"/> MLH <input type="checkbox"/>		
Room No:	Block/Floor:	
Date of Leaving:	Date of Return:	Duration of Leave:
Time of Leaving:		
Mode of transport for Leaving (Specify):		
Purpose of Leave:		
Phone No:		
Address in which you will be in your leave period:		
Parent's Phone Number:		
Signature of the student with date:		
Remarks & Signature of Resident Tutor:		
Remarks & Signature of Faculty Advisor		
Remarks by Warden:		



**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT**

**LADIES HOSTEL**

**Application for Mess cut (in case of more than 2 consecutive working days)**

**(Attach the leave application signed by Faculty Advisor)**

Name of Student:
Roll No:
Hostel: LH <input type="checkbox"/> MLH <input type="checkbox"/>
Room No:            Block/Floor:
Mess in which presently registered:
Reason for mess cut:
Period of Mess cut:
No: of days:
Have you availed mess cut so far in the present month, if so mention the days:
Signature of the student with date:
Remarks by Resident Tutor:
Remarks by Warden:



**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT**

**LADIES HOSTEL**

**Application for Permission for late entry for PhD Scholars (between 7pm and 11.00pm)**

Name of Student:
Roll No:
Hostel: LH <input type="checkbox"/> MLH <input type="checkbox"/>
Room No:            Block/Floor:
Reason for late entry to hostel:
Date/Period requested to report late to hostel:
Time of Returning back to hostel:
Lab/Room at NITC where you will be working:
Phone No:
Signature of the student with date:
Remarks by Guide:
Signature of Guide:
Remarks by Warden:



**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT**

**LADIES HOSTEL**

**Application for Permission for late entry for UG &PG students (between 7 pm to 9 pm)**

**(for Academic Purpose)**

Name of Student:
Course: B.Tech <input type="checkbox"/> M.Tech <input type="checkbox"/> M.Sc <input type="checkbox"/> MBA <input type="checkbox"/> MCA <input type="checkbox"/>
Roll No:
Hostel: LH <input type="checkbox"/> MLH <input type="checkbox"/>
Room No:            Block/Floor:
Reason for late entry to Hostel:
Date/Period requested to report late to Hostel:
Time of Returning back to Hostel:
Lab/Room at NITC where you will be working:
Phone No:
Signature by the student with date:
Remarks by Guide/Faculty in charge of lab/Faculty advisor/Faculty concerned (please indicate the dates and timing of the class/lab work/activity along with your remarks):
Signature of the /Faculty in charge of lab/Faculty advisor/Faculty concerned with date:
Remarks by Warden:
Signature of Warden:

**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT HOSTELS**  
**Application for Permission for cultural/co-curricular/extra-curricular activities**

*(write legibly with block letters)*

Name(s) of student (s) (If more no: of students are there, write the name of the representative student (one from boys and one from girls hostel who takes the responsibility of the group here and all other names with roll no and mobile no. hostel/room no. overleaf or attached sheet):		
Course: B.Tech/ M.Tech/M Plan/M.Sc/MBA/MCA/PhD Roll No:		
Mob. no: (give nos. of at least two students(1)		(2)
Hostel:	Room No:	Block/Floor:
Programme Details:		
Date/Period of Programme:		
Whether 1st year boys or /and girls are participating in the programme: (if yes, please attach separate list)		
Time of Return back to Hostel: (if separate for students, pl indicate separately)		
Place of activity details date wise with contact no. of an officer at the site: (use additional page if required)		
Signature of the student rep. with date:		
Name of Faculty member/RT/or person responsible/take care of the students participating the programme (with mob. No)		
It is certified that arrangements will be made for drinking water/snacks/first aid box at the programme site. Schedule will be with sufficient break. Name & Signature of above responsible officer with date:		
Name & Signature of Faculty I/C of the club/ forum/association etc. organizing the programme if she/he grants permission for the above as indicated:		
Date of submission to hostel:		
Ladies Hostel Warden (for girl participants):		
First year coordinating warden (for first year boys):		

**NATIONAL INSTITUTE OF TECHNOLOGY CALICUT HOSTELS**

**Application for Permission for out station over night stay from hostels (for boys& girls)  
for industrial visit /study tour /data collection etc**

*(write legibly in block letters)*

Name(s) of student (s) (If more no: of students are there, write the name of the representative student (one from boys and one from girls hostel who takes the responsibility of the group here and all other names with roll no and mobile no. hostel/room no. overleaf):		
Course: B.Tech/ M.Tech/M Plan/M.Sc/MBA/MCA/PhD Roll No:		
Mob. no: give at least two nos. of different students(1) (2)		
Hostel:	Room No:	Block/Floor:
Purpose with details:		
Date/Period requesting out station stay:		
Time of Return back to Hostel: (if separate for students, pl indicate separately)		
Place of activity details date wise with address/ contact no. of an officer at the site: (use additional page if required)		
Place of stay - date wise details with contact no (use additional page if required):		
Signature of the student with date:		
Name of Faculty members (with designation & mob. No) accompanying students		
Signature of Faculty member (at least one faculty accompanying) with date:		
Name & Signature of HOD if the Dept grants permission for the above as indicated:		
(HOD's Seal)		
Date of submission to hostel:		
Chief Warden	Hostel Warden	
Note: Please attach consent letter from parents.		