**DISTANCE** (in Km):



Fix your latest passport photo

## OFFICE OF DIRECTOR HOSTELS VEERANARI CHAKALI ILAMMA WOMEN'S UNIVERSITY

## APPLICATION FORM FOR HOSTEL ADMISSION (RENEWAL) 2025-2026

(to be filled by UG Fifth semester students)

1. College Name		VEERANARI CHAKALI ILAMMA WOMEN'S UNIVERSITY
a)	Course	
b)	Subjects	
c)	Roll number	
2. Personal details		
a)	Full name (in block letters)	
b)	Father's name	
c)	Mother's name	
d)	Guardian's name (when both parents are	
	not alive)	
e)	Profession of Father / Guardian as the case	
	may be (if in service, designation and	
	office)	
f)	Annual income of Father / Guardian	
3. 0	Communication Address	
a)	House No. / Flat No.	
b)	Village / Town / City	

c)	Mandal / District	
d)	State / Nationality	
4.	Distance (km)	
5.	Mobile / email ID	
6.	Category / group / sub-caste	
sec	Mess No. (in case availed hostel facility in cond year) / fresh application (in case plying first time)	
	(To be sign	ned by Father / Guardian)
respon		ward may be admitted to the University hostel. I shall be as charges and other charges. I shall be responsible for her of the University Hostels.
Date:		Signature of Father / Guardian Mobile No.
further		rce of the University / UG Hostels & Messes, VCIWU. I inal holidays and at any time if ordered to do so by the U.
	I also declare that the statements I have mad form and hostel admission can be canceled in	te in this application form if true and correct. My application in case found untrue.
Date:		Signature of the Boarder



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(For the Office use only)

Whether the applicant has been given Hos	stel admission? Granted	Not granted
a) Course		
b) Subjects		
c) College Admission No.		
d) Hostel allotted	Old Hostel / New Hostel	
e) Room No.	Mess No.	
Assistant Registrar	Warden	Director Hostels
	Principal	