



**योजना तथा वास्तुकला विद्यालय, विजयवाडा**  
School of Planning and Architecture, Vijayawada  
An Institute of National Importance, MoHRD, Govt. of INDIA.

**ADMISSIONS 2016-17**

**HOSTEL RECORD FORM**

**HOSTEL NAME** (Allotted by Office)

**ROOM NO** (Allotted by Office)

Date: .....

Name of the Student: .....  
(as per 10<sup>th</sup> / Equivalent)

Registration No.: ..... Department / Course: .....

Academic Year & Semester: ..... Date of Birth: .....

Blood Group: ..... Mobile No: .....

Name of the Parent/ Guardian: .....

Parent / Guardian Address (attach Proof): .....

.....Pin Code .....

Landline Phone No: ..... Mobile No of Parent/Guardian: .....

Name and Address of the Local Guardian: .....

.....

Landline Phone No: ..... Mobile No of Local Guardian: .....

Does the student suffer from any chronic illness or medical problem which would need urgent attention  
(Please state the problem clearly and write legibly):

.....

We hereby state that all the above information is true to the best of our knowledge and belief.

**Signature of the Parent/Guardian**

**Signature of the Student**

Affix a passport  
size photograph