

**APPLICATION FORM FOR EXEMPTION FROM RESIDING IN BACHELOR  
STUDENT'S BHAWAN (NON-RESIDENTIAL STATUS)**

To,  
**Asstt. Registrar (Students' Welfare)**  
**I.I.T, Roorkee**

Sir,

I am a registered Full-time student/Research Scholar and wish to stay with my parents/guardians, outside the campus /OR I am a self-supporting Student/Scholar and will stay with my family outside the campus/OR I am residing in married hostel with my family /OR Institute has refused to provide me any accommodation (strike off whichever is not applicable). It is, therefore, requested that I may kindly be allowed exemption from residing in the Bachelor Students' Bhawan and be allowed 'Non-Residing and Non-Dining' status for ..... Semester of the session .....

The following are my particulars:-

1. Name (In Capital Letters) : .....
2. Class: Branch: B.Tech./M.Tech./M.Sc./Ph.D. Deptt.....Session.....year I/II/III/IV/V
3. Present address/accommodation: Room No. .... Bhawan.....  
(If already residing in the Bhawan)
4. Full time/Part time: ..... Enrolment No. ....
5. When will the room be vacated (if already residing) ..... Date of Vacation .....
6. Marital Status ..... 7. Male/Female .....
- (a) Father's Name..... (b)Mother Name.....
- (c) Husband's Name (in case of married lady) .....
8. Date of 1<sup>st</sup>Registration of present class .....
9. Local Guardian's Name (if any) .....
10. Relationship (in case of Guardian) .....
11. ....
12. Permanent Home Address: .....  
Mobile.....  
Email.....
13. Address of residence where the student will be .....  
residing or already residing and during .....  
Non-Residential Status: .....
13. Reasons for stay outside: .....
14. Local Guardian Name: .....
- 15. DECLARATION :**
- (1) I shall pay hostel charges (if any) and establishment charges during my stay outside/OR in married hostel as per Institute/CCB rules.
- (2) I hereby undertake full responsibility of my family and myself during my stay outside the campus on the address given at SL. No. 12 above which I have taken at my own responsibility. I shall be fully responsible for everything during my stay outside.

**Recommended / Not Recommended**

Dated.....

Full Signature of Student

(Head of Department)

.....  
**ORDER OF THE DEAN OF STUDENTS WELFARE OFFICE**

**ALLOWED/NOT ALLOWED**

**Dated:** \_\_\_\_\_

**ASSTT. REGISTRAR (STUDENTS' WELFARE)**