Diary No:	
Dated:	



## HALL COUNCIL GC University, Faisalabad

**Photo** 

Superintendent

## HOSTEL ADMISSION FORM

Deptt:	Discipline:	Mor/Eve:	Roll No:	Session:	
Name (in block le	etters):		CNIC.No:		
Father's Name: _			(Attach Copy)  CNIC.No: (Attach Copy)		
Parent/Guardian'	s Occupation:	Monthly Income:	(Attach Copy)		
	e Address:				
	Phone 1				
Previous Examina	ation Passed:	Year:	Ma	rks:	
Undertaking:					
<ul><li> I shall comp</li><li> I undertake</li><li> I will not ap</li></ul>	e to strictly observe all reply with all the direction to pay all my dues in toply for shifting to any hostel immediately af	ns and orders issued ime. other Hostel.	by the Hostel Auth	norities.	
Signature of the P	arent/Guardian		Date: _	ure of the Applicant	
	commendation from,				
Signature:					
				(Stamp)	
•••••	·····	or Office Use Only		• • • • • • • • • • • • • • • • • • • •	
To admit Hostel	<b>(F</b>	•	,, 		
				n Hall Council	
•••••	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	••••••	• • • • • • • • • • • • • • • • • • • •	
Admitted on:	Во	arder No:			