



ST. THOMAS COLLEGE/ SCHOOL OF NURSING

Jyothi Hospital Campus,

P.O.Kuruda Dist-Balasore -756056,

Odisha-India, MobileNo:7656994520

Recent
Passport size
photo

E-mail: stsonjyothi@gmail.com

Website: www.jyothihospital.org.in

APPLICATION FOR HOSTEL [ONLY FOR GIRLS]

Name of the Course :

1. Name of the Student
(In block letters) :

2. Father's Name :

3. Mother's Name :

4. a.Address for
Communication :

b.Phone No. with STD code:
MobileNo. :

5. Contact No of Father :

6. Contact No of Mother :

7. Visitors Name : 1.
2.

To
The Principal
St. Thomas College of Nursing

Sub: Application for accommodation in Hostel

I have applied for admission to the Course, intend to stay in
The hostel maintained by your college. Therefore, I request you to provide me accommodation in the hostel. I
have read the rules and regulations of the hostel and I agree to abide by all the conditions.

Yours faithfully

Date: **Signature of the student**

I undertake that my son/daughter/ward would abide by all the conditions/regulations mentioned in
the rules and regulations and other conditions of the hostel.

Date: **Signature of the Parent**