

MAR APREM MEN'S HOSTEL

MARIVANIOS VIDYANAGAR, NALANCHIRA P.O., THIRUVANANTHAPURAM – 695 015

ADMISSION FORM FOR ACADEMIC YEAR 2026-27

1	Name of the Applicant		Passport size Photograph
2	Age, Date of Birth & Place of Birth		
3	Year of Admn & Branch	20..... – 20..... Branch _____	
4	Religion/Caste		
5	Denomination (if Christian)		
6	Student's Mobile No. & E-mail		
7	Name & Permanent Address of the Parent, Tel. No.		
8	Present Address, E-mail, WhatsApp No. of Parent		
9	Name, address & Tel. No. of Local Guardian.		

DECLARATION

By the Applicant

I have read the rules and regulations given in the hostel Hand Book. I promise to abide by the rules and regulations of this Hostel, to help the maintenance of good conduct and discipline, to set a good example of myself, to pay my dues punctually and to leave the Hostel when directed by the Warden to do so.

Place:

Date :

Signature of the Student

By the Parent/Guardian

I undertake responsibility of my son to fulfill the duties.

Place:

Date :

Signature of the Parent/ Local Guardian

Chief Warden/Warden