



# INSTITUTE OF ADVANCED RESEARCH GANDHINAGAR

(Established under the Gujarat Private Universities Amendment Act, 2011)

## Hostel Accommodation Form



Registration No .....

Name of Student .....

Degree .....

Course Major.....

Department .....

Address .....

Parents contact no .....

Student contact no .....

I ..... have read the rules and regulations of the hostel at IAR,Gandhinagar. I have understood and will abide by all the rules. I will cooperate with the administrative/hostel staff. I agree to pay the annual hostel fees in two installments. I understand that in case of default, my hostel accommodation may be cancelled.

**Signature of student .....**

Date of joining .....

Date of leaving .....

**Signature of**

.....  
**Hostel Incharge /Registrar**