

Indian Institute of Technology Indore
Phone: 0731-660 3468 Email: chiefwardenoffice@iiti.ac.in

Accommodation Form for
 Interns / Unregistered students/ Other categories
(Tick whichever is applicable)

1. Name: _____
2. Roll Number/Institute ID No.: _____
3. Home Address: _____

4. Course & Department: _____
5. Mobile: _____
6. Email ID: _____
7. Period of stay: From _____ to _____
8. Reason for stay: _____

I agree to pay the accommodation charges as per the rules.

(Signature with date)

PI/Faculty Advisor
(Name & Signature with date)
date)

Signature of HoD/DUGC/DPGC
(Name & Signature with
date)

Approved/ Not Approved

Chief Warden

For Hostel Use

Unit & Room No: _____ Hostel: _____

From: _____ to _____

Amount: _____

Payment Receipt No/ UTR: _____