HOSTEL CLEARANCE FORM

NAME: _____ ROOM NO: _____

NCHM ROLL NO: _____ BATCH: FY/SY/ TY

DUES CLEARED: YES ( )/ NO ( )

PARTICULARS	PROPER CONDITION	DAMAGED
FURNITURE		
LIGHT		
FAN		

All are hereby instructed to hand this over to 6th floor security before vacating hostel premises. Without the same, the refund will not be processed.

[HOSTEL WARDEN/SUPERINTENDANT] [ACCOUNTS]

DATE: _____