FORM C

(PARENTS/GUARDIAN MAY INFORM THE PRINCIPAL/WARDEN OF ANY CHANGE IN THE LIST GIVEN BELOW)

VISITORS TO THE HOSTEL

S.NO.	NAME	RELATIONSHIP	FULL ADDRESS	S TE	L. NO.	SIGNATURE
1			•••••	•••••		•••••
2						•••••
3						•••••
4			•••••			•••••
5						•••••
6						
		PERSONS WITH W	/HOM RESIDENT MA	Y GO OUT		
S.NO.	NAME	RELATIONSHIP	FULL ADDRESS	TEL. NO.	SIGN	ATURE
1						•••••
2						
3					••••	
4						
5						
6						
		HOME WHERE SI	HE MAY STAY FOR TH	HE NIGHT		
S.NO.	NAME	RELATIONSHIP	FULL ADDRESS	TEL. NO.	SIGNA	TURE
1						•••••
2			•••••	•••••		•••••
3						
4						
(SIGN. (OF THE LOC	AL GUARDIAN)				
DATE: .						

WARDEN