

AJAY KUMAR GARG INSTITUTE OF MANAGEMENT

REGISTRATION OF PARENT/LOCAL GUARDIANS

Name of student: Hostel/Room No.:		Student No.: Year :	Phone/Mobile No. Email. :
Father's Name:	Mother's Name:		
Residence Address & Ph. No:	Mobile No. and Email Id of Father:	Mobile No. and Email Id of Mother:	

Details of local Guardian (s)

Name :	Name :
Profession:	Profession:
Address:	Address:
Mobile No and Email:	Mobile No and Email:
Relation with student:	Relation with student:

Undertaking from Parents: (a) I (we) authorize the local guardians mentioned above to meet my son/daughter/ward _____ in the Hostel.

(b) The local guardian (s) is/are authorized to escort my son/daughter/ward outside the campus during permitted timings

Permission for Outings : My son/daughter/ward is permitted Outings during the permitted timings and as per the rules and regulations of the Hostel

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Father's Signature

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Mother's Signature

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Student's Signature

Photographs

(Father)

(Mother)

(Local Guardian)

(Local Guardian)