



Form No. _____

NATIONAL INSTITUTE OF FASHION TECHNOLOGY, DAMAN

An Institute of Design, Management & Technology
[Ministry of Textiles, Government of India]

HOSTEL APPLICATION FORM 2025

Nature of Admission: Regular/ NRI

Floor: _____ Room No. _____

Type of accommodation: AC

All details to be written in uppercase including email id

1. Name of the student:

2. Unique Id No. :

(Academic Roll No. for eg. BD/20/0001)

3. Date of Birth: _____

4. Gender: _____

5. E-mail ID (student's): _____

6. Mobile No. _____

7. Aadhar Card No. _____

8. Blood Group _____

9. Course: UG - TD/ PG - MFM / Semester _____

Affix passport
size
photograph

9. Parents details:

Affix
stamp size
photograph
of Father

FATHER'S NAME	
OCCUPATION	
OFFICE ADDRESS	
RESIDENCE ADDRESS	
LANDLINE TELEPHONE No.	
MOBILE No.	
EMAIL ID	

Affix stamp
size
photograph
of Mother

MOTHER'S NAME	
OCCUPATION	
OFFICE ADDRESS	
LANDLINE No.	
MOBILE No.	
EMAIL ID	

10. LOCAL GUARDIAN DETAILS

*Kindly note: Students are allowed to visit their authorized Local Guardian ONLY.
They are not allowed to visit their friends' residence/friends' LG at any
Circumstances. If there is no Local Guardian, you may mention
NOT APPLICABLE*

Affix stamp
size
photograph
of Local
Guardian

NAME	
RELATIONSHIP DETAILS	
OCCUPATION	
OFFICE ADDRESS	
RESIDENCE ADDRESS	
LANDLINE TELEPHONE NO.	

MOBILE NO.	
EMAIL ID	

11. ALTERNATE ADDRESS FOR CORRESPONDENCE: (If Any)

ADDRESS 1	ADDRESS 2

12. Any illness/Health Problem/ Medical Complaints /Mental/ Physical/ Skin Disease [YES/NO]

<i>Sr. No.</i>	<i>Name & Type of Diseases</i>	<i>Duration of Diseases</i>	<i>Care Required</i>

[Any changes in the contact details of parent and local guardian, kindly furnish the same to the hostel warden through the mail id provided]

13. DECLARATION:

I hereby affirm that the statement made and information furnished by me in the Hostel application form is true and correct, further I undertake to abide by the NIFT Hostel Rules. Final decision for grant of admission to the hostel will be bound to me decided by Competent Authority of NIFT.

I clearly understand that

- i.the allotment of rooms to students and mode of occupancy is not a matter of right.
- ii.NIFT will make all efforts to provide emergency medical care, but the Institute cannot be held responsible for any eventuality.
- iii.I am responsible for seeking Medical/Clinical advice for all my ailments, disease, infection from campus doctor or outside and take necessary care and take medicines/treatment.

iv.I am responsible for all my belongings.

v.I am responsible for my behaviour inside and outside NIFT campus & Hostel.

vi.I have seen and read NIFT hostel Rules and any case of non-compliance by me, the institute has right to expel me from the hostel without any notice in writing. NIFT will not be responsible for illegal or unauthorized activity attempted by me.

vii. Under No Circumstance the seat/ room allotted to me will be changed.

Student signature:_____

Parents Signature:_____

Date:

Station:

(Name of Hometown)

Note: This form should be submitted in person at the time of room allotment, when you reach Hostel. Kindly enclose NEFT details of HOSTEL FEE payment, copy of Academic Admission receipt along with this form.