



भारतीय प्रौद्योगिकी संस्थान गुवाहाटी  
**Indian Institute of Technology Guwahati**  
**Guwahati - 781 039**

Form No.  
**Hostel/08**

**FORM FOR ALLOTTMENT OF MARRIED SCHOLARS' HOSTEL**

Name: \_\_\_\_\_

Roll No \_\_\_\_\_ Programme \_\_\_\_\_ Dept \_\_\_\_\_

Status: Regular/Sponsored/QIP/External  
 (Please tick out, which is applicable to you)

Email: \_\_\_\_\_

Address: -

**(a) Present**

**(b) Permanent**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Pin Code: \_\_\_\_\_

Pin Code: \_\_\_\_\_

Phone No: \_\_\_\_\_

Phone No: \_\_\_\_\_

Date of Marriage:\* \_\_\_\_\_ Name of Spouse \_\_\_\_\_

(Please attach copy of marriage certificate)

Age of Spouse: \_\_\_\_\_ Years

Occupation of Spouse: \_\_\_\_\_

If the Spouse is employed, place of employment: \_\_\_\_\_

Other dependents, who will reside with you:-

Sl. No	Name of dependent (S)	Age	Relationship
1			
2			
3			
4.			

Date by which you intend to bring your family: \_\_\_\_\_

**Declaration**

1. The above particulars provided by me, are correct to the best of my knowledge. If any of the above is found to be false the allotment of accommodation will stand cancelled apart from any disciplinary action that might be taken by the institute.
2. I am applying for that accommodation mainly for my spouse and children. I shall abide by the rules and regulations of the allotment Rules of IIT Guwahati and will remain within the framework as formed by HAB time to time.
3. I shall intimate in writing to DoSA office in case of any of the above particular changes.

\_\_\_\_\_  
 (Signature of the HoD with seal)

\_\_\_\_\_  
 (Signature of the Applicant)

**Details to be filled by SA office: Date of Application received:** \_\_\_\_\_

**Waiting List Number (if any):** \_\_\_\_\_ **Whether Considered by HAB Authority: Yes/No**