

TRANSPORT FACILITY ADMISSION FORM

Approved by AICTE, Directorate of Technical Education, Haryana
Affiliated to Kurukshetra University, Kurukshetra (Conferred 'A' Grade by NAAC)
An ISO 9001: 2008 Certified Institute

Course (Please Tick): PhD M.Tech B.Tech MBA BBA PGDM

Branch

Semester

Transport From to

Please affix your latest passport size photograph

PERSONAL INFORMATION

Full Name (with Surname)

Father's Name

Mother's Name

D.O.B. Nationality Blood Group

Permanent Address

Student Mob. Student Email

LandLine (with STD Code)

Father's Mob. Father's Email

Mother Mob.

Father's Occupation Father's Designation

Father's Office Phone No (with STD Code)

CONTACT PERSON (IN CASE OF EMERGENCY)

Name: Mob.

Address

We declare that the information given above is true to the best of our knowledge. We agree that if any information furnished above will found incorrect, admission is liable to be cancelled. We declare that we have read and will observe all the Rules & Regulation of the Transport Facility.

Date

Signature (Applicant)

Signature (Parent / Local Guardian)

Name & Address of Local Guardian (If any):.....

a) Relationship:.....

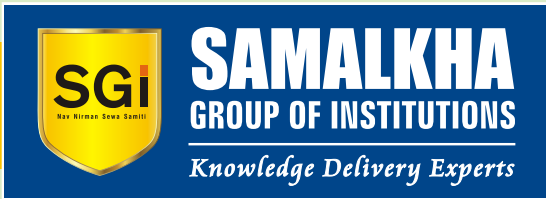
b) Contact No:..... Email:.....

DECLARATION BY THE PARENT/GUARDIAN OF STUDENT SEEKING TRANSPORT FACILITY

I,Father/Mother/guardian of Mr. /Ms. who has taken admission in programme at SGI and intends to avail transport facility solemnly affirm and declare that:

1. My ward is not suffering from any infectious disease, respiratory allergy or acute skin allergy and cardiac disorder.
2. My ward is not suffering from any type of epilepsy or a similar disease or any psychological disorder.
3. My ward is physically and mentally fit to best of my knowledge and belief.
4. Blood group of my ward is.....
5. Major surgery undergone by my ward in the last six month (if any) is :.....

Signature (Parent / Local Guardian)



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DECLARATION

I have read all the Rules and Regulations of the Transport Services. I hereby agree to abide by the rules and regulations of the Transport Services in force from time to time. I am liable for disciplinary action in case of any breach. We have also received a copy of SGI Rule Book and do hereby declare that we accept and will abide by all the Transport Services rules and regulations.

Date

Signature (Applicant)

Signature (Parent / Local Guardian)

FOR OFFICE USE ONLY

VERIFICATIONS AND ALLOTMENT

a) After verification of the particulars given in the form appended herewith, Mr./Ms.....
 Roll No.....of semester
 is hereby allotted Transport Services in the Bus Route No./Name
 Account section may accept the Transport Services fee/security as applicable.

Date

(Signature of O.I/C TRANSPORT SERVICES)

b) Received Rs...../- (Rupees..... only) toward Transport fee
 for the session.....from Mr./Ms. of.....
 Roll No..... Necessary entries have been made in the ERP software module. Necessary receipt has
 been issued to the student.

Date

(Signature of O.I/C Accountant)

c) After due verification and payment of necessary transport fee, Mr./Ms.....
 of....., Roll No.....has been allotted Transport Services in the Bus Route
 No./Name..... Please arrange to admit the student physically in the allotted
 Transport Services.

Date

(Signature of O.I/C TRANSPORT SERVICES)

d) Student granted admission in room no..... in the Bus Route
 No./Name Transport Services.

Date

(Signature of O.I/C TRANSPORT SERVICES)