



AFFIX
PHOTO
HERE

HOSTEL ACCOMMODATION APPLICATION FORM

| APPLICANT'S DETAILS | | | | | |
|---|---|--|-------------|---|--|
| NAME | | | PROGRAMME | | |
| | | | INTAKE | | |
| STUDENT ID | | NRIC/PASSPORT NO. | | | |
| ADDRESS | | | | | |
| PHONE | (H) | (HP) | EMAIL | | |
| HEALTH STATUS | <input type="checkbox"/> Good <input type="checkbox"/> Illness | | AGE | | |
| | _____ (Please write in corresponding details for emergency reference) | | GENDER | | |
| | | | RELIGION | | |
| | | | NATIONALITY | | |
| EMERGENCY CONTACT'S DETAILS | | | | | |
| NAME | | | | RELATIONSHIP | |
| PHONE | (H) | (HP) | | | |
| ADDRESS | | | | | |
| HOSTEL ROOM TYPE (BASIC FACILITIES & Wi-Fi INCLUDED) | | | | | |
| Type | Standard Hostel <input type="checkbox"/> Single Room <input type="checkbox"/> Twin Sharing Room <input type="checkbox"/> Twin Sharing Room (M) <input type="checkbox"/> Others _____ *Subject to availability | | | | |
| SIGNATURE OF APPLICANT | | | | | |
| <p>According to the Stamford College Hostel Rules and Regulations (Section 5.1), accommodation period of hostelite is 3 semesters (1 year) regardless of enrolled intake. Hostel fees is payable by yearly.</p> <p>I agree to abide by the Hostel Rules and Regulations determined by the Hostel Management committee of Seri Stamford College. I understand the disciplinary policy. I agree that failure to comply with these rules and regulations will result in appropriate action taken by the committee.</p> <p>_____ Signature _____ Date</p> | | | | | |
| For office use only | | | | | |
| Student Services Department | | Finance Department | | | |
| <input type="checkbox"/> Hostel Handbook <input type="checkbox"/> Hostel Keys <input type="checkbox"/> Access Card <input type="checkbox"/> Others _____ | | A. Hostel Fees <input type="checkbox"/> 1 Sem (RM_____ x 1) RM_____ <input type="checkbox"/> 3 Sems (RM_____ x 3) RM_____ <input type="checkbox"/> Others _____ RM_____ | | D. Payment Method <input type="checkbox"/> Cash <input type="checkbox"/> Funds Transfer <input type="checkbox"/> Cheque <input type="checkbox"/> Credit/Debit Card | |
| Allocation _____ Hostel _____ Room () | | B. Deposit <input type="checkbox"/> RM_____ | | E. Original Receipt _____ | |
| Check-in Date : _____ | | C. Total Amount : RM_____ | | | |
| Person-In-Charge : | | Person-In-Charge : | | | |