

My Poshtell Application No.: Ref No:.....

Academic Year:2026-27 Academic Period: Start ____/____/____ End: ____/____/____(MM/YYYY)

Personal Details:

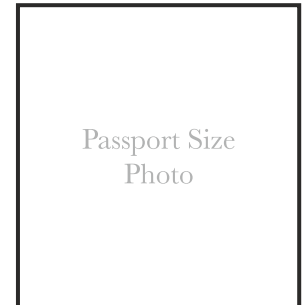
Student's Name*: (As per College Id card)

Application Gender* (Tick): Male Female Blood Group.....

Mobile No* (+ 91): Nationality.....

Email ID*:

Religion:..... DOB:



Permanent Home Address*:

.....State.....Dist.....Pincode.....

Government Issued ID No.*: (Submit a copy of ID proof along with application) Government Issued Document: PAN / Aadhar / DL / Voter ID / Passport / Others

Person with Disability Yes No Describe

Type of Quota: CET DCET JEE/Comed K International UNIGAUGE Others

Academic Details:

Institution: School of Engineering CDSIMER AHS Nursing Physiotherapy Pharmacy

Course*: Branch*:

University Student No.(USN)*: University Application No.:

Academic Standing* (Tick): 1st Year 2nd Year 3rd Year 4th Year 5th Year PG Others

Hostel Details:

S' Residences Boys Hostel 4 Sharing 3 Sharing 4 Sharing

S' Residences Girls Hostel 2 Sharing 4 Sharing (Dormitory)

Academic Year 2025-2026 2026-2027 **Meal Plan Subscription Type:** Veg NonVeg

Document Category

My Poshtell Registration Room Key Hand over Access Card Issued

- | | |
|--|---|
| <input type="checkbox"/> Govt. Issued ID Proof of Student | <input type="checkbox"/> Digital Passport Size Photo |
| <input type="checkbox"/> Govt. Issued Address Proof of Student | <input type="checkbox"/> Bank Payment Transactions Details - Hostel |
| <input type="checkbox"/> Student Hand Book - 2026-27 | <input type="checkbox"/> Bank Payment Transactions Details - Mess |
| <input type="checkbox"/> Students Residences Lease Agreement | <input type="checkbox"/> Declaration Form |
| <input type="checkbox"/> S' Residences Housing Policy Document | <input type="checkbox"/> Others (If any)_____ |



Parents Details:

Father's Name*:Mother's Name:

Father's Mobile* (+91) :Mother's Mob* (+91)

Father's Email ID*:Mother's Email ID*:

Local Guardian Name*:Emergency Contact Name*:

Relationship to the Applicant:Mobile No*: (+91):

Fees Payment Details: *

S' Residences Fee Payment Info

NEFT RTGS IMPS DD Cheque Wallet UPI Transfer

Receipt No:

Invoice No:

Invoice Date:.....

Name of the Person or company that made the payment

.....

Bank Ref No:

.....

Bank Ref Date:

Total Amount Paid:

Outstanding / Balance due:

Remarks :

.....

.....

Raynham Ventures (P) Ltd, Fee Payment Info

NEFT RTGS IMPS DD Cheque Wallet UPI Transfer

Receipt No:

Invoice No:

Invoice Date:.....

Name of the Person or company that made the payment

.....

Bank Ref No:

.....

Bank Ref Date:

Total Amount Paid:

Outstanding / Balance due:

Remarks :

.....

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Disclaimer and Consent:

The information provided in this form is true as per my knowledge. I understand that the housing application made to S' Residences does not guarantee a preferred room allotment as it is on first come first serve basis. I also understand that I need to make a full (100%) advance payment for the room allotment and mess fee prior to the commencement of the term. Further, I allow S' Residences to keep in records above given information and I also allow them to contact my parents/ relatives/ guardians or emergency

Student's Signature Here

Place : Harohalli

Date :

Only for office use

Department NOC

Hostel - Accounts	Mess - Accounts	Warden	IT - Access	Admin / Facilities