Indian Institute of Information Technology Allahabad Research & Development Section

Form for Day Scholar

Department	(AS/ ECE/ IT/ MS)	Date
Name of Student		Enrollment Number_
Date of Joining*	Current Academic Semester	
Certified that (Please tick o	ne of the following options) -	
(a) I am not residing in	Institute Hostel/ RSA/ MRSA	(Attach a copy of approval obtained for this
purpose).		
(b) I have vacated my I	Hostel Room / RSA/ MRSA (Str	ike out whichever is not applicable) No.
on	(Date) & don't wish to us	se this facility for the rest of the duration of
my course / research	n work in Ph.D. Program.	
Therefore, it is requested th	at I may be considered as a Day	Scholar.
Signature of the Student		Forwarded,
		Supervisor(s)
For BH/ GH, Application may be For RSA/ MRSA, Application m	e f/w to CoW office. ay be forwarded to Estate Office.	
To be filled	by Staff, Representing the Re	spective BH/GH/RSA/MRSA
The information in (a)/ (b)	provided by the Student as abo	ove is verified and found correct/ incorrect &
student may / may not be o	considered as a Day Scholar. (St	rike out whichever is not applicable)
Comment (If any)		
Date		
Staff Signature of BH/GF	I/RSA/MRSA	Warden/ Chairman, CoW / EO
F/W a copy to R&D Section	on for records	

^{*} Opening date of the Semester One or the date of email of "Enrollment Confirmation" sent to students by ERP, whichever is later, will be the Date of Joining in the Program.