



**ANNA UNIVERSITY REGIONAL CAMPUS – TIRUNELVELI**  
**TIRUNELVELI – 627 007**  
**HOSTEL VACATING FORM**

Phone Dir : 0462-2554055

Office: 0462 – 2551298

Fax : 0462-2552877

Date :

**HOSTEL DUES CLEARANCE**

1	Name Of The Student	
2	Room No.	
3	Name Of The Hostel	
4	Parents Name	
5	Communication Address with pin code	
6	Department / Branch	
7	Year Of Study	
8	Date Of Joining	
9	Date Of Vacating The Hostel	
10	Reason For Vacating The Hostel	
11	Hostel Dues, If Any	
12	Signature Of The Student	
13	Signature Of The Parent	

(To be submitted for hostel dues clearance)

**Staff in-charge**

**DEPUTY WARDEN  
(Girls / Boys Hostel)**

**WARDEN**