



**BAHRIA UNIVERSITY ISLAMABAD CAMPUS**

Shangri-La Road, Sector E-8, Islamabad

**Annex B**

1" x 1"

Photograph

(Qty 3)

**FATIMA HOSTEL**

**Application Form**

Enrollment No: \_\_\_\_\_ Name: \_\_\_\_\_

Department \_\_\_\_\_ Program \_\_\_\_\_ Semester: \_\_\_\_\_

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Cell No.: \_\_\_\_\_

CNIC#: \_\_\_\_\_ Student's Contact: \_\_\_\_\_ Email: \_\_\_\_\_

Present Address: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Contact #:** \_\_\_\_\_

CNIC#: \_\_\_\_\_ Email: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Contact #:** \_\_\_\_\_

CNIC#: \_\_\_\_\_ Email: \_\_\_\_\_

Residential / Present Address: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ Country \_\_\_\_\_

**Local Guardian's Name:** \_\_\_\_\_ **Contact #:** \_\_\_\_\_ **CNIC#:** \_\_\_\_\_

Email: \_\_\_\_\_ Address: \_\_\_\_\_ City: **Islamabad / Rawalpindi**

Relationship with the student: \_\_\_\_\_ Signature: \_\_\_\_\_

**Medical History** (if any) \_\_\_\_\_

Would you like to avail the messing facility      Yes      No

Blood Group: \_\_\_\_\_ Emergency Contact No.: \_\_\_\_\_

**Signatures:** Applicant: \_\_\_\_\_ Parent \_\_\_\_\_ Date: \_\_\_\_\_

(Please provide copies of ID cards of Applicant, Parents and Guardian)

**Kindly attach following documents with the form:**

1. CNIC copies of student
2. CNIC copy of both parents
3. CNIC copy of Guardians
4. CNIC copy of Visitors

**Instructions:**

1. Fill in the form clearly in Capital letters
2. Photographs should be latest and passport size with name at the back
3. Documents can be sent by mail or courier service on the following address:

**Fatima Girl's Hostel**

**Bahria University**

**Islamabad Campus**

**Shangrilla Road**

**E-8Islamabad**

**Contact:**

**92-51-9260002/477/475**

**92-51-9260694**



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**FATIMA HOSTEL**

**Visitor's Permission Slip**

Mr./Mrs./Ms. \_\_\_\_\_ CNIC No.: \_\_\_\_\_

Address: \_\_\_\_\_ Contact No.: \_\_\_\_\_

is hereby allowed to visit my daughter / ward \_\_\_\_\_

Enrollment No \_\_\_\_\_ from the Bahria University Fatima Hostel premises.

He / She may be permitted to visit my daughter / ward in accordance with the hostel regulations.

He / She may also be permitted to collect my daughter from the hostel premises when proceeding on leave. (please delete if not applicable)

This permission is valid for (please tick one as appropriate):

- One time only.
- Till the end of the current semester.
- Permanent, till rescinded.

Please attach the following documents of the authorized visitor:

- Photograph (1" x 1").
- Copy of CNIC card.

Date \_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_  
(Parent / Guardian)

CNIC No. \_\_\_\_\_

Contact No. \_\_\_\_\_

Note: A separate permission slip be submitted for each authorized visitor.



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Shangri-La Road, Sector E-8, Islamabad

**FATIMA HOSTEL**

**Permission Slip**

I hereby allow my daughter \_\_\_\_\_ Enrollment No. \_\_\_\_\_

Department \_\_\_\_\_ Program \_\_\_\_\_ Semester \_\_\_\_\_

to commute to/from Bahria University Fatima Hostel on her own as and when required.

Bahria University administration will not be responsible for any accident/mishap or her whereabouts, outside the University premises.

Parent's Signature \_\_\_\_\_

Name \_\_\_\_\_

CNIC # \_\_\_\_\_

Date \_\_\_\_\_

