

**AGA KHAN UNIVERSITY
HOSTELS**

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Request for Hostel Accommodation:

Student ID: _____
(Please leave blank)

Name: _____
Last Name First Name Middle Name

Father's Name: _____ Gender: _____

Date of Birth: _____ Blood Group: _____
Day Month Year

Residential / Permanent Address: _____

Res. Phone: _____ Cell: _____

Email: _____

Emergency contact, name and address(es) - preferably in Karachi

1. _____

Relationship with the applicant _____ Phone _____
Cell _____ Email _____

2. _____

Relationship with the applicant: _____ Phone _____
Cell _____ Email _____

Applicant's Signature Parents Signature Date

FOR OFFICE USE ONLY

Application accepted: _____ Hostel allocated: _____ Not accepted: _____

Waiting list for _____ Hostel Room #: _____ Floor: _____ Block: _____

Key #: _____ Occupied on: _____ Vacated on: _____

Comments of the Hostel Coordinator at the time of vacation:

Date Coordinator, Male Hostel /
House Mother, Female Hostel Manager's signature