



K S ACADEMY

●●● pathway to growth

(A Professional Institute Exclusively for CA aspirants)

KSA HOSTEL APPLICATION FORM

Name of the Student :

Gender Male Female

Date Of Birth :

Parent's Name :

Parent's Occupation :

Reference Website Pamphlet Advt. Friends Others

Course Pursuing CA CPT CA Foundation CA Intermediate CA Final

Category Preferred Economy Premium Elite

Duration of Stay (in months) : From To.....

Address For Communication :

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Parent's Tel. No:..... Student's Tel. No:.....

Email ID : Blood Group:.....

Name of Local Guardian : Contact Number:.....

Address of Local Guardian :

.....

Mode of Payment Cash Cheque/DD Card Online

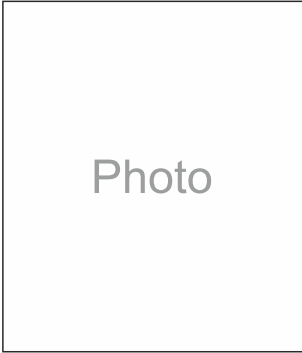
Hostel Deposit Paid Rs. : Hostel Fee Paid Rs.

Name of Bank : Branch:.....
(if applicable)

Cheque or DD No. : Amount: Date :
(if applicable)

PDC Cheque No. : Amount: Date :
(if applicable)

Reference ID for online payment :



Declaration

I hereby declare that the information furnished herein above are correct

Date

Signature of the Student