Anjaneya Ayurved College and Hospital, Makhamalabad, Nashik. Application form for "Night Out" - Hostel

Date of Application :- Night Out Nos.:- To,	Room No In Current Month	:- :-	
The Rector / Warden,			
Respected Madam,			
I		request you to grant a "Night	t
Out" permission to me for	night's from / /	to / /	
Reason for Night Out : I will be staying at the following address duri on / / Thanking you.	ng the above said period. I	will be returning to the hostel	
Yours Faithfully	Name & Add	lress (Guardian):	
		· · ·	
Signature of Student			
Permitted by	Relation:		
			·e
from / / to / /			
		Signature of the LC / Dara	+ م
		Signature of the LG / Pare	ΠL
👍 🛛 <u>Anjaneya Ayurved College an</u>	d Hospital, Makhama	alabad, Nashik.	
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on / /			
Thanking you.			
Yours Faithfully	Name & Ado	lress (Guardian):	
Signature of Student			
Permitted by	Relation:		
This is to inform you that Kum./ Smt		stayed her	е
from / / to / /			

Signature of the LG / Parent