



GARISSA UNIVERSITY
HOSTEL DEPARTMENT
HOSTEL ACCOMODATION SUBSEQUENT APPLICATION FORM

(Please fill in block letters and attach copy of bank slip)

STUDENT DETAILS:

Name.....Gender.....ID No.....

Phone No.....Admission No.....Email Address.....

ROOM BOOKING DETAILS:

Year of Study (i.e. I, II, III, IV).....Semester (i.e. 1, 2).....

Academic year (i.e.2017/18).....Room amount paid Kshs.....

Receipt (attach copy of receipt) Special Requirements (specify if any).....

DECLARATION

1. I understand and accept the general conditions for hostel accommodation: that accommodation will only be considered after proof of payment and that Accommodation payment is done once per academic year through the Bank at the Rate of **KSHS:5600/=**
2. **BANK DETAILS:**EQUITY BANK GARISSA BRANCH ACCOUNT NAME GARISSA UNIVERSITY COLLEGE **ACCOUNT NO:---0580261526380**
3. I declare that the particulars in this subsequent application form are true to the best of my knowledge.

Student signature.....Date.....

FOR OFFICIAL USE ONLY

Regular/parallel/school based..... Total payment:

Hostel blockRoom No.....

Authorized Signature.....Date.....

Remarks.....