

# NATIONAL INSTITUTE OF TECHNOLOGY SIKKIM

Ravangla, South Sikkim – 737 139

## STUDENT GATE PASS (FOR HOME) – Gate Copy

Date:

I, Mr. / Ms. ...., Roll No..... of 1<sup>st</sup> / 2<sup>nd</sup> / 3<sup>rd</sup> / 4<sup>th</sup> Year

B.Tech in the Department of ....., want to go home on ..... at .....

A.M./P.M.

The purpose of my visit to home is .....

I will return to Ravangla campus on ..... by .....

During absence form Ravangla

Home Address:

My Contact No.:

Parent's name:

Parent's Contact No.:

Approved by

Chief Warden / FISA Member

FIAA / FIAA Member

Signature of the student

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