

1. IAD offers room facilities for all outstation students on a 'first-come-first-serve' basis. Rooms will be provided from **21 July 2018 to 31 May 2019**. There are limited seats and you are therefore advised to apply at the earliest to secure a place.

2. Location

The location for the room facilities have been carefully selected to be an easy commute from the IAD campus. Residents also have easy access to grocery/convenience stores and pharmacies, as well as entertainment options such as cinema halls and dine-in/home delivery restaurants.

3. Description

Fully furnished rooms with washrooms are offered in spacious, modern, well-lit environment. They are furnished with a bed, study table with a bookshelf, chair and wardrobe, along with lights, fans and air-conditioning.

4. Shared Services

- Refrigerator, microwave, electric kettle and RO water purifier
- Standard menu for breakfast and dinner (student can opt for plan with or without meal)
- Lounge area with a television that has cable connectivity
- Wi-Fi Internet connectivity
- Fully automatic washing machine

5. Security Services

The facility has 24/7 security.

6. Applying to ISRA

For more details, kindly write to us at rooms@isbf.edu.in or contact Ms. Vani Khanna on +919971795613 or +911140430000.

7. Charges

(AMOUNT IN INR)

ROOM CHARGES (per head)		MASTER DELUXE	SUPER DELUXE	DELUXE	STANDARD
A	Occupancy charges	2,20,000	1,90,000	1,70,000	1,50,000
B	Security deposit	20,000	20,000	20,000	20,000
A+B	Total (Including Deposit)	2,40,000	2,10,000	1,90,000	1,70,000
C	Meal Plan Charges	50,000	50,000	50,000	50,000
A+B+C	Total Charges (including deposits & meal plan)	2,90,000	2,60,000	2,40,000	2,20,000

*Note:

- The above mentioned charges include bedding, electricity, WiFi, water and housekeeping facilities.
- The electricity charges are based on the estimate of the previous year's students' consumption. If rate/taxes/usage are revised, the extra charges will be paid by the residents on the basis of actual consumption.
- In case the Government of India levies any tax like GST on rooms, the same shall be applicable as per the relevant notification.

We have read the details regarding Facilities & Charges.

Date

(Student's Name & Signature)

(Parent's/Guardian's Name & Signature)

1. Payment Details

Payments are to be made as per the schedule given below.

Room Plan (with meal)

(AMOUNT IN INR)

INSTALMENT PLAN	MASTER DELUXE	SUPER DELUXE	DELUXE	STANDARD	DUE DATE
First Instalment	2,30,000	2,07,000	1,92,500	1,77,500	At the time of Admission
Second Instalment	60,000	52,500	47,500	42,500	On or before 10 Nov 2018
Total	2,90,000	2,60,000	2,40,000	2,20,000	

Room Plan (without meal)

(AMOUNT IN INR)

INSTALMENT PLAN	MASTER DELUXE	SUPER DELUXE	DELUXE	STANDARD	DUE DATE
First Instalment	1,92,500	1,70,000	1,55,000	1,40,000	At the time of Admission
Second Instalment	47,500	40,000	35,000	30,000	On or before 10 Nov 2018
Total	2,40,000	2,10,000	1,90,000	1,70,000	

Note: Any student who wishes to opt out of the Meal Plan has to inform ISRA authorities via email with appropriate reason(s). In this case, food charges for one month, i.e. INR 5,000 will be deducted from the total amount paid.

2. Payment Modes

- Payments can be made through a demand draft drawn in favour of:

'ISBF SCHOOL OF PROFESSIONAL STUDIES PVT LTD', payable at New Delhi.

- Payments can also be made via bank transfer, as per the details provided below:

Bank Name: ICICI Bank

Bank Address: 17 - A, Ring Road, Lajpat Nagar-IV New Delhi - 110 024

Account Name: ISBF School of Professional Studies Pvt. Ltd.

Account no.: 071405000419

RTGS/ NEFT Code: ICIC0000714

Please inform the Admissions Office in case you wish to use this mode of payment. For all queries, you can write to us at rooms@isbf.edu.in or contact Ms. Vani Khanna at +919971795613 or +911140430000.

3. ISRA Refund Policy

Situation	Refund
Student withdraws after paying First Instalment but withdraws from the programme on or before 10 July 2018	First instalment minus INR 5000 towards processing fees
Student withdraws after 10 July 2018	No refund

Students withdrawing from ISRA must send an email to the management at rooms@isbf.edu.in from his/her official college email ID, with the subject line 'Request for Withdrawing from Room'. Withdrawal by any student/resident will be considered as effective from the date of actual vacating of room facilities, or from the date of actual vacating of room facilities, or from the date of withdrawal mentioned in the request email whichever is later.

If a student does not occupy the room facilities within 20 days of commencement of the academic session, and also does not notify ISRA in writing of reasons for his/her absence, the student will be deemed to have forfeited his/her seat, and management/authorities will be free to offer the seat to other candidates.

In all matters related to ISRA, fee payments and refunds, the decision of the ISRA authorities shall be final and binding on all ISRA residents.

We have read through all the details, and agree to pay all the instalments as aforementioned Instalment Plan.

Date

(Student's Name & Signature)

(Parent's/Guardian's Name & Signature)

1. The initial allotment of rooms, once decided for this year, shall be final and binding.
2. Residents are not allowed to bring any private furniture or utensils into the premises.
3. Residents will be provided with one set of Almira/Cupboard keys and must keep it in safe custody. In case these are misplaced, a duplicate set can be obtained on payment of INR 1000.
4. No responsibility will be taken by the management/authorities for the loss of any valuable items or personal belongings.
5. While leaving the room, residents must take care to switch off all the fans/light geysers and ACs, etc. Every effort must be made by the students to economize the use of electricity. Students cannot have heating rods, heaters and blowers and irons due to fire safety hazards.
6. Breakfast will be available from 7:30 am to 8:30 am. Dinner will be served from 8:00 pm to 9:00 pm.
7. Residents are advised to maintain a proper and decent dress code while in their residency and in the vicinity of the hostel.
8. No outsider will be allowed inside the hostel, without prior written permission. Entry to outsiders other than the bonafide residents is allowed only with prior permission in writing from the authorities.
9. Possession/consumption of any alcoholic drinks, tobacco/cigarettes, or indecent/incriminating literature inside the room facilities is strictly prohibited and will be reported to the Disciplinary Committee of ISRA.
10. Possession/consumption of drugs/narcotics/psychotropic substances, firearms or weapons will lead to the student being summarily expelled from the room as well as from the college. No petitions will be entertained thereafter on any ground whatsoever.
11. Any misconduct, abusive or threatening behaviour, assault, causing distress or fear to others, ragging, any kind of sexual abuse, vulgar language or racial discrimination, outraging the modesty of any roommate or class fellow or playing loud music is strictly prohibited in the room facilities as well as in its vicinity. Any such offence will be reported to the Disciplinary Committee and can lead to expulsion.
12. If a resident damages any property, he/she will have to bear the full cost of repair/replacement.
13. The rooms are liable to be inspected by the Institute authorities at any time.
14. Residents must report back to their rooms by 9:30 pm. If you wish to return later than 9:30 pm, you must seek prior permission in writing from the authorities, who will telephonically verify any such requests with parents before according such permission.
15. No resident will be permitted to take overnight leave without prior permission from the authorities. Residents who wish to stay out overnight on weekends at permitted addresses authenticated by parents/ guardians or want to visit their home-town for a specific period, are required to obtain prior permission for the same from the authorities via email/ text message.
16. Pets (of any kind) are strictly forbidden in the residence/ premises.
17. It is mandatory for all students to have valid medical coverage under a medical claim policy. Copy of which to be submitted to the authorities. In case of emergencies, the first aid facility is available in the room. Any case of illness shall be reported immediately to the concerned authorities for taking necessary action. All expenses in this regard will be borne by the student himself/herself. The Institute has two Super Specialty Hospitals nearby for any kind of medical emergency.
18. If there is any change in the details and particulars of parents/local guardians, it is the responsibility of the student to inform the authorities about the same.
19. All residents must report any mishap/disciplinary matter or problems coming to their attention to the caretaker or the concerned authorities at IIAD.
20. Any matter, not expressly provided for in these rules, will rest at the absolute discretion of the COO/Director of IIAD who also reserves the right to modify any of the aforementioned rules as and when necessary.

We have read, understood and agree to all the rules & regulations mentioned in this document.

Date

(Student's Name & Signature)

(Parent's/Guardian's Name & Signature)

Room Allotment: ___ Master Deluxe ___ Super Deluxe ___ Deluxe ___ Standard

Meal Plan: ___ With Meal ___ Without Meal

Gender: ___ Male ___ Female Allotted Room Number: _____ Floor: _____

Important Instructions

- Read the ISRA Rules & Regulations document carefully before filling the Application Form
- All fields to be filled in CAPITAL LETTERS only. Incomplete or illegible forms will not be accepted.
- Please write N/A (Not Applicable) wherever applicable.
- All information provided by you is intended for official use only and will remain confidential.

PASTE YOUR RECENT
COLOUR PASSPORT SIZE
PHOTOGRAPH HERE

Date of Application: _____
DD/MM/YY

Name of the Student: _____
FIRST NAME MIDDLE NAME SURNAME

Year of Joining: _____ Course Applied: _____
YYYY

Date of Birth: _____ Blood Group: _____
DD/MM/YY

Medical History (if any) _____
(Please attach relevant document(s) from your family physician in case of any specific ailment)

PARENT'S/ GUARDIAN'S DETAILS

DETAILS	FATHER	MOTHER	LOCAL GUARDIAN
Name			
Mobile Number			
Landline			
Address			
Email ID			

Date

(Student's Name & Signature)

(Parent's/Guardian's Name & Signature)

- Three recent passport sized photographs
- The following documents should be duly signed & submitted - a) ISRA Declaration and b) ISRA Rules & Regulations
- 'Medical Fitness Certificate' from a registered medical practitioner
- Photocopy of the student's medical insurance certificate /or cashless card
- First Instalment of Room Charges

1. I hereby declare that all the aforesaid particulars given by me are correct. My allotment of ISRA may be cancelled if any of these particulars are found to be incorrect or my conduct is found to be against the rules.
2. I agree that the room will be allotted to me on the terms and conditions given in the enclosed ISRA Rules & Regulations, and any modification made by the authorities of IIAD from time to time. I shall abide by these rules and regulations.
3. I agree that ISRA authorities' decision in all matters concerning my room will be final and binding on me.
4. In case of any misconduct on my part, or if I am found in breach of any ISRA Rules & Regulations, the decision taken by the Disciplinary Committee of ISRA will be final and binding.
5. I understand that I must vacate the room facilities by 31 May 2019.
6. Before vacating the room, I shall clear my dues in full and return any items issued to me in original form to the concerned authorities.
7. I have made the required payments for the room as per charges provided above
8. I understand that any refund will be processed as per the ISRA Refund Policy.

We have read the ISRA Declaration document and shall abide by the same.

_____	_____	_____
Date	(Student's Name & Signature)	(Parent's/Guardian's Name & Signature)

Acknowledgement
(To be filled in by the institute)

Mr. / Ms. _____ has been allotted a room and has paid
_____ on _____.
DD/MM/YYYY

Remarks, if any: _____

(Parent's/Guardian's Name & Signature)

Chief Operating Officer