



ISBM
UNIVERSITY
KNOWLEDGE ♥ WISDOM ♥ HUMANITY

Established under the Chhattisgarh Private Universities
(Establishment and Operation) Act, 2005

Village - Nawapara (Kosmi), Block & Tehsil - Chhura, Dist. -
Gariyaband, Chhattisgarh, India - 493996

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APPLICATION FOR AVAILING BUS FACILITY FOR THE SESSION:- _____

To

The Registrar,
ISBM University
Nawapara (Kosmi), Chhura, Gariyaband (C.G.)

Sub: Application for availing Bus Facility/Continuation of Bus Facility.

Sir,

As I wish to avail University conveyance facility and request you to kindly issue me a Bus Pass for the session..... My personal details are given below:

1. Name of Student: _____ Blood Group: _____

2. Programme: _____ Year I/II/III. Date of Birth: _____

3. Father's/Husband's Name: _____

4. Address: _____

5. Contact No.: _____ Date of Availing Bus Facility: _____

6. Bus Stop from where the students requires facility: _____

Term & Conditions:

- (1) Students are required to pay (6)Six Month's Bus Fees (Five Month's Security Deposit & One Month fee for the present month).
- (2) Bus Facility can be availed only on production of valid Bus Pass.
- (3) This Pass is not transferable.
- (4) Loss of bus pass should be intimated immediately to concerned authority.
- (5) Students are allowed to board only from the bus stop mentioned on the pass.
- (6) Duplicate Pass will be issued on payment of Rs. 100/-
- (7) Money deposited for transport facility of University will not be refunded if facility not availed by the students for him/her own reason.

All the information given above is true to the best of my knowledge and I really wish to avail the bus facility for the entire academic year.

Date: _____

Signature of the Student

Place: _____

FOR OFFICE USE ONLY

Application Accepted/Rejected due to: _____

Bus Pass No.: _____ Date of issue: _____

From : _____ To _____

Date of starting bus facility: _____ Name of Bus Stop: _____ Bus No.: _____

Date: _____ Bus Fees: _____ Fee for full session: _____

Valid up to: _____

Authorized Signatory