APPLICATION FOR REFUND

Date: _____

Excess Fee [ ]	Excess Deposit [ ]	Hostel Deposit [ ]

(Please tick whichever is applicable)

• **Student Number**	
• **Name**	
• **Email ID**	
• **Student Mobile number**	
• **Campus**	
• **School Name**	
• **Course (Program)**	
• **Student Bank account details** o **Type of account(Savings/Current)** o **Bank account number** o **IFSC code** **(Please attach a cancelled cheque)**	

(**Signature of Student**)

Attachments Required
- Excess Fees/Excess Deposit Refund
  Original Receipt of Excess Fees/Excess Deposit along with photocopy of Fees Receipt/Deposit Receipt
- Hostel Deposit Refund
  Original Hostel Deposit Receipt signed by Hostel-in-charge & DR Administration.

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Acknowledgement

Received Refund application from _____(Student name) towards _____(Specify type of Refund) on _____(Date)

Signature of Counter Staff, Stamp and Date