FEE REFUND FORM

(Re-evaluation and Golden Repeat Examination)

	n and Golden Repeat Examination)
Sr. No. [For Office Use)	
Registration No. of the Student	
Full Name	
Father's Name	
Complete Postal Address with PIN	
Mobile Number	
Email ID	
Class	
Paper Codes Applied	
Year of Last Examination	
Amount of Fee Deposited with date and reference no.	
Amount of Fee Refund Claimed	
Mention for which fee refund is being claimed: Re-evaluation/ Golden Repeat	
Reasons for fee claim	
Student's Bank Account Number	
Name of the Bank and Branch	
IFSC Code of the Bank	
Enclosures:	
1. Proof of Fee Deposit	
2. Photocopy of Bank Account Pa	ssbook Cover Page

Signature of the Student with date

		(Assistant Controller of
(Dean/HoD)	(IT Cell/Evaluation Section)	Examinations)