

DAYALBAGH EDUCATIONAL INSTITUTE
DAYALBAGH, AGRA -282 005

Dated:

APPLICATION FOR REFUND OF FEE

Note: Refund of fee on discontinuation from a course of study, is admissible only on submission of written information/application up to 30 days after formally-notified last date of admission.

The Registrar,
Dayalbagh Educational Institute,
Dayalbagh, Agra.

Sir,

I certify that I deposited ` _____ on _____ (copy of e-Receipt/Receipt of fee deposited is enclosed) as semester fee for class _____, Semester _____. I have discontinued my studies in the aforesaid program for which an application has been submitted to Dean/Principal/Course Coordinator on _____ (copy enclosed). I have discontinued my studies from this Institute.

Presently, I am studying in class _____ Semester _____ (Continued his/her studies) or I have discontinued my studies from this Institute, therefore fee deposited for class _____ Semester _____ may please be refunded to me.

Encl: as detailed below

(Name in Hindi) (Name in English)
Signature of applicant with date

(a.) Copy of e-Receipt/Receipt of fee deposited for the course being continued i.e. Class _____ Semester _____

(b.) Original copy of e-Receipt/Receipt of fee deposited for the course which has been discontinued: _____ date _____.

| | |
|-----------|-------------------|
| Name : | Father's Name |
| Roll No : | Class |
| Address: | Semester |
| | Mobil / Phone No. |

(For office use from where the applicant continued his/her studies)

Verified status of the candidate as well as fee deposit as indicated in the enclosure above.

Signature of Dealing Assistant
of concerned Faculty/College

Signature of Dean/Principal/Coordinator
with date and rubber stamp

(For office use where the applicant did not continue his/her studies)

Verified status of fee deposit as indicated in enclosure above. (Date)____-____-20____ was formally-notified as the last date of admission. It is confirmed that the candidate had submitted his/her application in the office of the faculty on _____ and eligible for 100% 90% 80% 50% and 00% refund of fees as per table.

Signature of Dealing Assistant
of concerned Faculty/College

Signature of Dean/Principal/Coordinator
with date and rubber stamp

(For office use at C.A.O.)

The Treasurer, DEI

The refund of fee as mentioned above may please be arranged after deducting ` _____ as processing charges.

REGISTRAR

