## UNIVERSITY OF DELHI APPLICATION FOR REFUND OF FEES

	The bill must be pre-rexceeds Rs. 5000/ Strike out which is no	eceipted and revenue stamps of Rs	s. 1/- affixed if the amour	nt .	
Name of the a	applicant				
Amount for which refund is claimed					
University receipt No. & Date					
Reason for refund					
Course					
Class roll no					
Date of admission					
Last Date of a					
Date of startin					
Date of leaving the institution					
Date of applying for refund of fees Residence Address:					
Residence Add	iress:				
			(To be filled by the Fi	nance Branch)	
Mobile No.			Account wise details	given below:-	
Email					
Account holder Name			MG-I A/c	Rs	
Bank Account Number			UDF A/c	Rs	
Bank & Branch			ARGF A/c	Rs	
IFSC Code			Research Scheme A/c	Rs	
			Total Amount	Rs	
Signature	of the Applicant	Dated			
Office Note:	<ol> <li>Certified that no</li> </ol>	othing is due from Shri/Miss/Mrs			
	2. The applicant	<ol> <li>Certified that nothing is due from Shri/Miss/Mrs</li></ol>			
	and				
	3. Date of Expire o				
	and of Empire of Membership of Library Is				
	4. The reason sta	4. The reason stated in the above column have been verified and found correct and			
	recommended the	hat the refund be made to him/her			
				ne Departmen	
			(with	ı seal)	
assed for Rs	(Rs. In w	FOR OFFICE USE ONLY ords		)	
ate:			Section Officer (Finance VII)		
ote: 1. I 2. A	meompiete application s	hall be rejected without any intima	ation		