



PERSONAL DETAILS

(To be filled in the CAPITAL LETTERS only)

Student Name :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father's Name :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Enrollment No. :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Roll No :	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Department :	<input type="text"/>										Program :	<input type="text"/>										Semester :	<input type="text"/>					
Hostel Facility :	<input type="text"/>	Hostel Name :	<input type="text"/>																		Room No. :	<input type="text"/>						
Transport Facility :	<input type="text"/>	Bus Route No. :	<input type="text"/>																									

1st Year Registration Fees :		Receipt No. :	
Semester Fees :		Receipt No. :	
Transportation Fees :		Receipt No. :	
Security Deposit - University		Receipt No. :	
Security Deposit - Hostel		Receipt No. :	

To be Filled by student :

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[illegible]

Note: The Original fee Receipts , ID Card & Due Clearance Certificate must be enclosed with the application (as applicable).

(Student Signature)

FOR OFFICIAL USE ONLY

(To be filled up by the Registrar office)

Date of Cancellation of Admission : <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> </div>		Date of Commencement of Classes : <div style="display: flex; justify-content: space-between; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> </div>	
<div style="border: 1px solid black; padding: 5px; font-weight: bold;">FEE AMOUNT TO BE REFUNDED</div>	1st Year Registration Fees :	Semester Fees :	
	Security Deposit – University :	Transportation Fees :	
	Security Deposit – Hostel :		
Remarks			

Date : DDMMYY

Verified by**FOR ACCOUNTS OFFICE USE ONLY**

FOR ACCOUNTS OFFICE USE ONLY			
Fees Payment received mode : Online <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> DD <input type="checkbox"/>	Amount of Fees Received : <input style="width: 90%;" type="text"/>		
Fee Amount to be refunded : <input style="width: 90%;" type="text"/>	Date of Refund : <input style="width: 90%;" type="text"/>		
Remarks : <div style="border: 1px solid black; height: 40px; width: 100%;"></div>			
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Verified by	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Date	<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature of Approval Authority	

APPROVAL AUTHORITY

APPROVAL AUTHORITY	
Remarks :	
Date :	<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">D</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">D</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">M</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">M</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">Y</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">Y</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">Y</div> <div style="border: 1px solid black; width: 30px; height: 30px; text-align: center; line-height: 30px;">Y</div> </div>
<div style="border-top: 1px solid black; display: inline-block; width: 150px; text-align: center;"> Signature & Stamp (Registrar) </div>	