**NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI**

**OFFICE OF THE DEAN ACADEMIC**

**COURSE DISCONTINUATION REFUND FORM**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **Permanent Roll No** |  | **Date** |
| **2** | **Name of the Student** |  |
| **3** | **Course** (B.Tech./B.Arch./M.Tech./M.Arch./ MCA/MBA/MSC/MA/M.S./Ph.D)  |  |
| **4** | **Department** |  |
| **5** | **Branch / Specialization** |  |
| **6** | **Communication address with** **Pin code**  |  |
| **7** | **Discontinuation Details****Reason for Discontinuation****Discontinuation applied date****Discontinuation approved date****No dues certificate copy attached** | **YES / NO** |
| **BANK DETAILS** ( Attach a photocopy of the 1st page of the passbook that show the information sought in Sl 09 to 12) |
| 9 | **Name of Account Holder**  |  |
| 10 | **Bank Account No. (Preferably SBI A/c)**  |  |
| 11 | **Name of the Bank**  |  |
| 12 | **IFSC**  |  |
| 13 | **Student Mobile No and Email**  |  |

 Enclosure: **1. Course Discontinuation form 2. No dues copy 3. All payment copy 4. Bank a/c No. proof**

**DECLARATION**

**I hereby declare that all the information given by me in support of my application are true, complete, and correct to the best of my knowledge.**

#  (Students Signature)

# Date:

**For Office use only**

Verified up to discontinuation all fees paid: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certified that the information furnished by the student is verified with the records and found correct. The amount to be refunded Rs. \_\_\_\_\_\_\_\_\_\_(In words\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)**

 Jr. Asst Sr. Supdt. Asst.Registrar (Acad) Dean (Academic) **Registrar**