



ADMISSION CANCELLATION FORM

Name	:	
Roll No.	:	
Degree	:	MS / Ph.D.
Department	:	
Branch / Specialization	:	
Address	:	
Phone No	:	
E-Mail ID	:	
Reasons for Cancellation	:	

Declaration

I would like to cancel my provisional admission for the seat allotted in this institute. I request you to kindly return the initial fee that I had paid as per the refund rules.

Signature of the Student

Signature of the Guide	
Signature of the HoD	
Associate Dean (Academic)	
Dean (Academic)	