

Fee Refund Form



(FOR STUDENT USE ONLY)

Refund No. _____

Date: _____

A. Personal Information

- | | |
|--------------------------------|------------------------------|
| 1. Name of Student _____ | 2. Father Name _____ |
| 3. CNIC # _____ | 4. Postal Address _____ |
| 5. Registration # _____ | 6. Roll # _____ |
| 7. Semester _____ | 8. Program _____ |
| 9. Fee Deposited Rs _____ | 10. Deposit Date _____ |
| 11. Challan # _____ | 12. Bank & Branch Name _____ |
| 13. Contact # (Optional) _____ | 14. Email(Optional) _____ |

B. Refund Claim Information

Please state the reason of refund: (✓)

- | | |
|---|--------------------------|
| (i) Ineligibility of student to apply in particular program | <input type="checkbox"/> |
| (ii) Admission in other institution | <input type="checkbox"/> |
| (iii) Student does not wish to continue his/ her study | <input type="checkbox"/> |
| (iv) Any other reason(s) _____ | |

C. Attachments

- | | |
|-------------------------------|--------------------------|
| (i) Copy of Deposited Challan | <input type="checkbox"/> |
| (ii) Copy of valid CNIC | <input type="checkbox"/> |

By my signature below, I hereby certify that all information provided as a part of this application is true and correct to the best of my knowledge. I understand that a false statement may disqualify me for refund and I may become liable for legal prosecution.

Date: _____

Applicant's Signature _____

(FOR OFFICE USE ONLY)

<p>Reporting Department: _____</p> <p>Comments: _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Recommended/Not Recommended _____</p> <p>_____</p> <p>Dealing Official Incharge/Superintendent Recommending Authority With Stamp</p>	<p style="text-align: center;">Receipts Section</p> <p>Sanction of expenditure for an amount of Rs. _____ to _____ on account of refund of fee is hereby communicated to audit department.</p> <p>Amount to be refunded:</p> <p>Gross Amount _____</p> <p>Deduction _____</p> <p>Net Amount _____</p> <p>(In words) _____</p> <p>Comments _____</p> <p>_____</p> <p style="text-align: center;">Clerk/A.A AT/AAO Dy Tr Addl Tr Treasurer</p>
<p style="text-align: center;">Audit Department</p> <p>Pay Order No. _____ Dated _____</p> <p style="text-align: center;">Passed for Payment of</p> <p>Rs. _____ (Rupees)</p> <p>_____</p> <p>Asst. A.T/A.A.O Audit Officer</p>	<p style="text-align: center;">Campus Payment Section</p> <p>Cheque# _____ Dt: _____ Amount (Rs.) _____</p> <p>Comments(if any)</p> <p>_____</p> <p style="text-align: center;">Dealing Official A.T/A.A.O Deputy Treasurer</p>

General Instructions

1. Refund will be made after deduction @15% of total fee in case the student is ineligible for admission and refund will be made after deduction @10% of total fee in case the student do not wish to continue and applied for refund before dispatch of books.
2. Fee refund claims will only be made, if the application is submitted within one year after fee deposit date and books were not dispatched to the candidate.
3. All kind of other fee including but not limited to degree fee, reappear exams fee, change of name/father name, examiner registration fee, tutor registration fee, workshop centre change, late assignment evaluation fee, analysis fee, rechecking of answer scripts fee, NOC fee, subject/group change fee, tender fee etc. will not be refunded.
4. The students who have deposited their fee in excess, complete excess fee will be refunded or adjusted as the case may be.

Mailing Address

Treasurer Department (Receipts Section), Block#2, Room#4, AIOU, H-8, Islamabad (051-9057130)