

## **Dyal Singh Evening College**

(University of Delhi)
Lodhi Road, New Delhi 110003
A full-fledged Day College

## **Application Form for refund of Fee/Security Deposit**

	<u>To</u>	be filled by t	he Student		
Name:	Class:				
Roll:	Year of Admission:				
Refund Applied for:	Fee		Security D	Deposit	
Reason for Refund:					
Date:	Signature of Parents/G		/Guardians	Signature of Student	
For Administrative Office			<u>For Librar</u>	·Y	
No Dues			No Dues.		
Dealing Assistant	S.O. (A	dmn.)	Lib. Atten	dant	Librarian
For Accounts Office			For Computer Lab	<u>o.</u>	
Total fees Paid:					
Security Deposit Rs.:			No Dues		
Total Amount Refundable: _					
Assistant	S.O. (A	cct.)		S.T.	A (Computer)
Passed for Payment Rs.					
S.O. Accts.	A.O.		Bursar		Principal
Received Cheque No		Dated	of Rs		
In full and final settlement of	f all dues.				
Date:				Stude	nt's Signature