

# ACADEMY OF SCIENTIFIC AND INNOVATIVE RESEARCH

An Institution of National Importance, established by an Act of Parliament, India

## Application Form for Refund of Semester Fee/ Any other Fee

Academic Programme ..... Session ..... 20 \_ \_ , Enrollment No.  
..... Name of Institute.....

I request you to refund my fee for the particulars given below:

Name of the Candidate with full address	Amount of Fee Paid (INR)	Dated and Reference No.	Amount claimed as refund (INR)	Subject/ Reason for Refund

Beneficiary Name: ..... Bank Name ..... IFSC.....

A/c. No. ....

Total amount claimed as refund Rs..... (Rupees .....)

I certify that the above statements are correct to the best of my knowledge.

..... Signature with date.....

**Signature of the Candidate**

**Signature of the Coordinator**

**(To be filled in by the AcSIR Office)**

The reasons given in each case have been verified and found correct:

1. Refund claim for Rs..... may kindly be sanctioned/ approved in favour of the candidate..... Enrollment No.....
2. Refund claim for Rs..... may be adjusted against the outstanding fee of .....
3. Any other .....

..... Signature with date.....

**(Dealing Assistant, AcSIR)**

As per the information received from the AcSIR Academic Centre as mentioned above, the amount of Rs..... claimed may be refunded/ adjusted, if received.

**(Finance Section, AcSIR)**

**Associate Director (Admn & Fin), AcSIR**

**Director, AcSIR**