

Shri Mata Vaishno Devi University

Kakryal, Katra-182320 (J&K) INDIA (A Statutory Technical University of J&K Legislature; recognized u/s 2(f) & 12(B) of UGC)

FORM NO. AA/15: Application Requesting for Refund of Security Fee

(Form to be submitted to School and Entry to be made in Register Maintained for the Purpose)

1. l	Details to be filled by the student:	
a.	Name of Student:	
b.	Category:	
c.	Nationality:	
d.	Entry No:	
e.	Address with Pin code	
f.	Contact:	
g.	Email:	
h.	School:	
i.	Programme:	
j.	Semester:	
k.	Date of start of Final MajorExamination:	
l.	I hereby certify and undertake:1. that I have cleared all my dues other than Hostel related dues and there is nothing pending against me.	
	2. that in case there is still some due pending against my name then the same may be deducted from my Security Fee.	
	 that I have attached my University I-Card with this application / Submitted relevant fine as I have lost the I-Card (Challan for Fine of Rs. 300/- attached) that I have returned all books, equipment and any other material which was issued to me that given below is my E-mail, Phone No. and the Address for corresponding with me and for sending important documents to me: 	
	6. that I will be fully responsible for communicating the change in Address/E-mail/Phone or for not responding to information sent to same, if any, and absolve the University from any consequence that may arise because of my failure to do so timely.	
	7. that my Transcript, Migration Certificate & Provisional Passing Certificate	
	may be sent at the address mentioned above by Speed Post or Registered Post at my risk and responsibility and that the applicable Fee and charges for sending the same may be deducted from my Security Fee.	
	may not be sent by Speed Post or Registered Post. I will collect them in person. However, the applicable Fee may be deducted from my Security Fee.	



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bank account are as under:	
-Name of the Bank:	
-Branch:	
-IFSC Code:	
- Name of the Account Holder- (Student OR Parent only):- Account No.:	
(Attach copy of cancelled cheque	of same Bank)
Please enclose the proof of payment	itional copies of Transcript duly sealed and signed.
Forwarded to Evamination Wing th	Signature of the Students Date:
_	
narks:	
	Signature with Date
warded to Faculty I/C Examination	:
narks:	
	Signature with Date
1	- Name of the Bank: - Branch: - IFSC Code: - Name of the Account Holder - (Student OR Parent only): - Account No.: (Attach copy of cancelled cheque Further I require Nos of additional Transcript is Rs. 500 Forwarded to Examination Wing the d, School of: marks: warded to Faculty I/C Examination