

### राष्ट्रीय प्रौद्योगिकी संस्थान दिल्ली

#### NATIONAL INSTITUTE OF TECHNOLOGY DELHI

(शिक्षा मंत्रालय, भारत सरकार के अधीन एक स्वायत्त संस्थान)

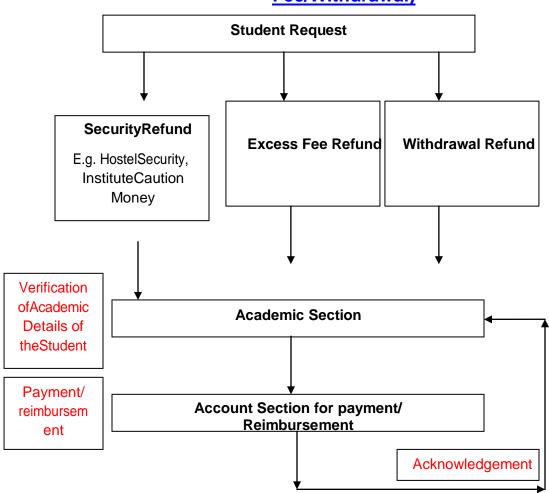
An autonomous Institute under the aegis of Ministry of Education (Shiksha Mantralaya), Govt. of India)
Plot No. FA7, Zone P1, GT Karnal Road, Delhi-110036, INDIA
दूरभाष/Tele: +9111-33861000, 1001, 1005 फैक्स/ Fax: +9111-27787503,

वेबसाइट/Website: www.nitdelhi.ac.in

#### Request Process for Refund (Security/ Excess Fee/ Withdrawal)

- 1. Signed hard copy of the following form has to be submitted at Academics office (Room No. 305) for UG/PG/PhD students.
- 2. Application should be attached with valid documents in support of application.

## Process Flow for Refund (Security/ Excess Fee/Withdrawal)





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### **Request Format for Refund**

Name of the Student			
Roll No.			
Date of Birth			
Father's Name			
Year of Admission			
Program (B.Tech/M.Tech/PhD)			
Branch			
Birth Category (Gen/SC/ST/OBC)			
Family Annual Income Category			
(Less than 1 Lac/ 1-5 Lac/more than 5 lac)			
Present Semester(applicable for			
Current Student only)			
Present Correspondence Address			
Tresent correspondence radiess			
Email Address			
Contact Number (Mobile)			
Purpose (tick in appropriate	Security Re	fund:	
one(s))	i)	HostelS	ecurity
			•
	ii)	Institut	e CautionMoney
	Excess Fee Refund		
	Withdrawal Refund		
Account Details	Account No	:	IFSC Code:
	Bank Name	with add	dress:



Date of Receipt: ReceivedBy:

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<b>Tuition Fee Paid Details (Attach a copy of Tuition Fees Printout)</b>							
Semester	Receipt No	Fee Paid	Date	Remarks			
I							
II							
III							
IV							
V							
VI							
VII							
VIII							
Total Fee Paid:							
Hostel Fee Details (Attach a copy of Hostel Fees Printout)							
Semester	Receipt No	Fee Paid	Date	Remarks			
I							
II							
III							
IV							
V							
VI							
VII							
VIII							
	Total Fee Pai						
Date of Vacating the Hostel Room:							
(Signature of the Student) Place: Date:							
No. of Attached Documents:							
For use of Academic Office only							
Date of Receipt:							
ReceivedBy:							
For use of Chief Warden Office only							
Date of Receipt:							
ReceivedBy:	_						
For use of Account Office only							