

# Appendix 9



## Guru Gobind Singh Indraprastha University Kashmere Gate, Delhi-110403

### FORM FOR WITHDRAWAL OF ADMISSION

1. Programme : \_\_\_\_\_  
(from which withdrawing)
2. Name of Student : \_\_\_\_\_
3. Parent / Guardian's Name : \_\_\_\_\_
4. Address (At which refund is required to be sent):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
PIN \_\_\_\_\_
5. (a) Telephone : \_\_\_\_\_  
(b) Mobile : \_\_\_\_\_
6. Enrollment Number : \_\_\_\_\_
7. CET Roll Number : \_\_\_\_\_
8. (a) Cheque to be Issued in the Name of \* : \_\_\_\_\_  
(b) Relationship (with Student) : \_\_\_\_\_

#### UNDERTAKING

We understand and know the refund rules of the University & agree to abide by the same and we further understand that the refund would be made in due course of time through a Crossed Cheque issued as per above request.

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(Signature of Parents / Guardian)

Dated \_\_\_\_\_

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(Signature of Student)

Dated \_\_\_\_\_

**Compulsory Encl. : Both copies of Fee Receipt issued at the time of Admission / Counselling in ORIGINAL**

\* The cheque will be issued in the name of student if no information is given under column 8 above

*Note : Use photocopy of this Form*