



NATIONAL INSTITUTE OF TECHNOLOGY, TIRUCHIRAPPALLI

OFFICE OF THE DEAN ACADEMIC

COURSE DISCONTINUATION REFUND FORM

1	Permanent Roll No		Date
2	Name of the Student		
3	Course (B.Tech./B.Arch./M.Tech./M.Arch./ MCA/MBA/MSC/MA/M.S./Ph.D)		
4	Department		
5	Branch / Specialization		
6	Communication address with Pin code		
7	Discontinuation Details Reason for Discontinuation Discontinuation applied date Discontinuation approved date No dues certificate copy attached	YES / NO	
BANK DETAILS (Attach a photocopy of the 1 st page of the passbook that show the information sought in S1 09 to 12)			
9	Name of Account Holder		
10	Bank Account No. (Preferably SBI A/c)		
11	Name of the Bank		
12	IFSC		
13	Student Mobile No and Email		

Enclosure: 1. Course Discontinuation form 2. No dues copy 3. All payment copy 4. Bank a/c No. proof

DECLARATION

I hereby declare that all the information given by me in support of my application are true, complete, and correct to the best of my knowledge.

(Students Signature)

Date:

For Office use only

Verified up to discontinuation all fees paid: _____

Certified that the information furnished by the student is verified with the records and found correct.
The amount to be refunded Rs. _____ (In words _____)

Updated in MIS(Fees) _____ date _____