राष्ट्रीय प्रौद्योगिकी संस्थान अगरतला
NATIONAL INSTITUTE OF TECHNOLOGY AGARTALA

APPLICATION FOR REFUND OF EXCESS AMOUNT

1	**Name of the student**	
2	**Enrollment No.**	
3	**Course** (BTECH/BSMS/BTMT/MTECH/MCA/MBA/MSC/PHD)	
4	**Department**	
5	**Branch/Specialization**	
6	**Amount Paid as fee**	
7	**Challan/Receipt No. /Transaction No. and Date** (Photo copies should be Enclosed)	
8	**Excess Amount Paid in Semester, Issuance of various certificates etc.**	
9	**Actual Amount Claim and Purpose**	
10	**Academic Year**	

BANK DETAILS
(Attach a photocopy of the 1st page of the passbook that show the information sought in Sl 10 to 14)

11	**Name of Account Holder**	
12	**Bank Account No. (Preferably SBI A/c)**	
13	**Name of the Bank & Branch**	
14	**IFSC**	
15	**Mobile No and Email**	

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

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

Jr. Asst   **Asst.Reg(Acad)**   **Asso Dean(Acad)**   **Dean(Acad)**

Audit   **AR(Finance)**

Registrar