



FEE WAIVER APPLICATION FORM

NAME :

PROGRAMME :

SCHOOL :

SEMESTER :

ENROLMENT NUMBER :

CATEGORY :
(UR/EWS /SC/ST/PwBD/OBC)COMBINED GROSSFAMILY ANNUAL :
INCOME (as per document furnished)FATHER'S NAME, OCCUPATION & :
OFFICE ADDRESSMOTHER'S NAME, OCCUPATION & :
OFFICE ADDRESS

CONTACT NUMBER :

AUD STUDENT EMAIL ID :

I belong to SC/ST/PwBD/OBC/UR/EWS, and, I hereby certify that the family income disclosed by me is the combined family annual income. If at any stage, it is found that I have furnished wrong information and/or submitted false certificate(s), I am aware that my admission stands cancelled and fees paid by me will be forfeited. Further, I will be subject to legal and/or penal action as per the provision of the law.

Date:

Place:

Signature of the Applicant

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Acknowledgement Slip

Student Name —

Enrollment No. —

Programme —

Fee Waiver Form Submission Date —

Receiver's signature & stamp with date