

**Kuvempu  University**

**BILL FOR REFUND OF ADMISSION / TUITION/ EXCESS AMOUNT FEES**

Name and Address of the Candidate	Year / Semester Reg. No.	Particulars of fee payment			Reason for Refund	Adjustment if any	Net amount repayable	Remarks
		In rupees.	Receipt / Challan No.	Date				

Rupees \_\_\_\_\_ only

Certificate : 1. Certified that refund is noted against the Original entry in the Departmental Accounts.  
 2. Certified that refund regarding the above mentioned sum is not paid previously.  
 Note : Bill should be submitted in duplicate along with the Original proof of Payment.

Student Signature

(Counter Signed for

Rs. \_\_\_\_\_

(Counter signed for)

Chairman Signature & Seal

Rs. \_\_\_\_\_

(AC) Deputy Registrar, Signature & Seal