

भारतीय प्रौद्योगिकी संस्थान कानपुर INDIAN INSTITUTE OF TECHNOLOGY, KANPUR कार्यालय अधिष्ठाता, विद्यार्थी कार्य Dean of Students' Affairs Office

## **EXCESS FEE REFUND FORM**

Academic Year	Semester (Odd/Even/Summer)		
Student Name	Room No./Hall		
(Mr./Ms.)	No.		
Department:	Programme		
Roll Number:	Category		
(Dual Degree Student	(GN/OBC/SC/ST		
Please write both Roll No.,	/Ph / FN / EWS)	(Which category you belong)	
Email Id	Alternate email id		
Mobile No.			
TSA Bank Account	IFSC Code:		
No.			
Write you're a/c no which is given in IITK Account section.	Branch Name:		

## (A) Payment Details: (Filled by the student)

Fees Paid by Student Amount (Rs.)	Net Banking/ NEFT / Deposit in Institute Account	Actual Fees Amount (Rs.)	Amount to be refunded (Rs.)	Dated: Enclosed the copy of payment
1				
2				

(B) Provide the following if Fees waiver claimed.		(Provide Father's Income Proof, Mother Income Proof, and Self income if any		
Aadhar Number	Parents names as per DOAA record	Income In (Rs.)	Copy of Income Proof. (ITR / Income Certificate)	
1				
2				
Note: Please attached fees receipts, ITR/income proof, and any other related documents.				
I hereby undertake that the information filled in column B above is correct to the best of my knowledge and I am eligible for fees waiver/refund. I shall be fully responsible for any discrepancies if arises in future.				
	Sign. ( ) Name:			

## For DOSA office Use Only

Excess Fee Details In which head	Parent Total Income	Fees Paid (Rs.)	Fees Refund (Rs.) Head of Fees refund	Nature of payment
Checked by	Dated	Verified by	Dated	