

**Controller of Examinations**  
University of Gujrat

### APPLICATION FOR FEE REFUND

Candidate's name: \_\_\_\_\_

Father's name: \_\_\_\_\_

Reason: Ineligibility  Excess Amount  Passed after Revision of Result

Medical Certificate  Expired before/during the course of Exam

Total Deposited Amount: \_\_\_\_\_ (Original or Copy attached) Bank Challan No. \_\_\_\_\_

Designated Bank Branch: \_\_\_\_\_ Claimed Amount for Refund: Rs. \_\_\_\_\_/-

Program: **B.A/B.Sc/B.Com**  **M.A/M.Sc**  Annual/Supplementary: \_\_\_\_\_

Latest Result Intimation Card (photocopy attached): Yes  No

Postal Address: \_\_\_\_\_

Contact #: \_\_\_\_\_

#### **Attachment:**

- 1. Application for Fee Refund must be submitted in Examination Department within 30 days after the last date for submission of Examination Forms with Triple Fee schedule. After that no fee claim will be entertained. 25% fee will be deducted as per rules.**
- 2. Original Fee Deposited Bank Challan.**
- 3. Attested copy of CNIC**
- 4. Hand written application in which reason should be clearly mentioned.**
- 5. Attested copy of latest result card copy.**
- 6. Letter of Form rejection must be attached (In Case of Form Rejection).**

**Dated:** \_\_\_\_\_

\_\_\_\_\_  
**Candidate's Signature**

(For official use)

**Recommendations:** \_\_\_\_\_

(Examination rules section-A clause i, ii & iii (page#07) refers in this regard).

**Sig:** \_\_\_\_\_

**Approved/Not Approved**

**Comments:**

\_\_\_\_\_  
\_\_\_\_\_

**Controller:** \_\_\_\_\_

**Treasurer**