

**FORM FOR REFUND OF TUITION FEE DEPOSITED BEFORE ALLOCATION OF SEAT FOR THE  
ACADEMIC SESSION \_\_\_\_\_**

(To be submitted by the candidate to the Registrar, Atal Medical and Research University, HP at Nerchowk,  
Distt. Mandi)

1. Name of Student : \_\_\_\_\_
2. Father's Name : \_\_\_\_\_
3. Course/Programme : \_\_\_\_\_
4. AMRU Application No. : \_\_\_\_\_
5. NEET- Roll No. : \_\_\_\_\_
6. Marks of NEET- : \_\_\_\_\_
7. AMRU State Merit Rank : \_\_\_\_\_
8. Have you allocated any Seat/College? Yes/No \_\_\_\_\_
9. If Yes, please fill following details:

Counselling Round	Seat Allocation Status (YES/NO)	Allocated College Name	Token Amount Details
2 <sup>nd</sup> Round of counselling			
Mopup Round of counselling			
Any Other Round			

10. Date of online counseling round wherein the college was allocated : \_\_\_\_\_
11. Amount of token fee deposited: \_\_\_\_\_ Receipt No. \_\_\_\_\_  
Date: \_\_\_\_\_ Payment Mode: \_\_\_\_\_ Other Details: \_\_\_\_\_
12. Bank Account No. of candidate only \_\_\_\_\_
13. IFSC Code No. \_\_\_\_\_ Name of Bank & Branch \_\_\_\_\_
14. Mobile No. \_\_\_\_\_ Email: \_\_\_\_\_
15. Any other information: \_\_\_\_\_
16. Reason for claiming refund (Attach Proof): \_\_\_\_\_

I hereby declare that I have not taken admission to MBBS/BDS/ \_\_\_\_\_ course in any of the Medical/Dental/Nursing/ \_\_\_\_\_ College after allotment of seat. As such, the amount of tuition fee as deposited by me before allocation of seat maybe refunded to me as per provisions of the prospectus.

( Signature of Parents/Guardian )

सर्वे भवन्तु सुखिनः  
सर्वे सन्तु निरामयाः

(Signature of Candidate )

Date: \_\_\_\_\_