

**APPLICATION FOR ADMISSION WITHDRAWAL & FEE REFUND 2026-27**  
**(fee refund as per DIT University Policy)**



Student's Name			Father's/Mother's name		
Address and Contact			Student's ID No: (As mentioned on the Admission Letter)		
Program & Branch			Date of Application by the Student:		
Brief description of the reason for Admission withdrawal			Bank account details for fund transfer		
			Name of the Account Holder		
			Relation with the student		Father / Mother / Self
			Account No.		
			IFS Code		
			Bank Name		
			Branch Address		
Particulars of Fee Deposited (To be filled by the student)					
Particulars	Date of Deposit	Receipt No.	DD No./ Cash	DD drawn on bank	Amount Paid
Course fee					
Hostel fee					
Transportation fee					
Others					
Total:					
Declaration by the Student: I hereby express my consent, to abide by DIT UNIVERSITY FEE REFUND POLICY on my own free will.					
Signature of the Student:					
For the use of school/Concerned department					
Particulars / Facilities	Facilities availed upto (Date)	Remarks by the concerned authorities / HOD			
		Name of the authority	Designation	Signature	
Classes Attended			HOD/Coordinator		
Hostel Facility			Chief Warden		
Transportation Facility			Transportation Officer		
Learning Resources			Librarian		
Please attach photocopy of the relevant documents / receipts.					
The date of submission by student with all records and details will be considered for the calculation of the refund					
Withdrawal Form No. (To be filled by Admission Office)	Date of Receipt of Application (To be filled by Admission Office)	Withdrawal Recommended By:  Head Admissions		Withdrawal Recommended By:  Registrar	
Approved by:  Vice Chancellor		Date of De-registration on ERP:	De-registration By: Name & Signature	Refund Initiated by:  Accounts Office	