## Request / Letter for Withdrawal/Cancellation of Admission

Candidate Details	Date: /20
Name:	
Father's Name:	
Date of Birth:	
Roll No. Allotted:	
Programme in which Admitted :- M.Tec	ch/B.Tech./MBA/MCA/Ph.D. (Please tick)
If Admission in M. Tech. then which spe	ecialization:-
Department/ School:	
Mobile No.:	
E-Mail:	
Date of Admission:	
Amount deposited on Admission (Attac	ch fee receipt):
Date of Withdrawal:	
Bank details/ Address for receip	t of fee refunded:
Address Please attach address proof	Bank Details
r lease attach address proof	Bank Name:
	Branch Name:
	Bank IFSC code:
	Bank A/c No.:
	Name of A/c holder:
request you to kindly arrange to r	nission for the seat allotted in NIT, Kurukshetra in 20 I refund fee/security deposit as per Institute/Admission Agency ellation of my admission I have no right on the admission seat re.
	Signature of Candidate
The above candidate is allowed to	o withdraw his/her seat on his/her own request.
Chairman (Admission Committee) DATE:	/ Dean(Academic)/ Faculty I/c (Academic)

## Note: -

- 1) For Minor (Less than 18 years of age) students, the consent of their parent is must before withdrawal/cancellation of the admission.
- 2) The presence of the Student is must during cancellation of his/her admission.
- 3) The student must carry original Admission/Allotment letter, Student ID Card, Photo ID Proof, Address proof and other required documents at the time of cancellation of the admission.