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Mumbai Pradesh Arya Vidya Sabha's
GURUKUL COLLEGE OF COMMERCE
(College Code - 551)
(Permanently Affiliated to the University of Mumbai)
NAAC Accredited "B+" Grade (2nd Cycle)
(ISO Certified: 21001/14001/50001)
Tilak Road, Ghatkopar (East), Mumbai – 400 077 (PH: 022 2501 5688 / 93217 84236)
Email: - gccghatkopar@gmail.com Website: - www.gurukulcollegeofcommerce.com

Application form for Refund of Library/Caution Money/Laboratory Deposits

To,
The Principal
Mumbai Pradesh Arya Vidya Sabha's Gurukul College of Commerce,
Tilak Road, Ghatkopar(E), Mumbai- 400077.

Dear Sir/ Madam,
I was a student of your college studying in the _____ class during the academic year 20 - 20 and wish to apply for refund of Caution Money Deposit / Library Deposit/Laboratory Deposit.

My particulars are as under:
Academic year :- _____ Class: - _____ Div: _____ Student UID No.:_____

Name in full: _____
(Surname) (Student Name) (Middle Name) (Mother's Name)

Contact No: - _____ Email ID: - _____
Final Year University Exam Seat No - :_____ PRN No - _____
Aadhaard Card No - :_____ Name on Aadhar - _____
ABC ID No - :_____ Name on ABC ID - _____

Amount of Library Deposit Rs._____ Receipt No._____Date_____
Amount of Caution Money Deposit Rs._____ Receipt No._____Date_____
Amount of Laboratory Deposit Rs._____ Receipt No._____Date_____

Bank Details:

Beneficiary Name: _____

Account no: _____Bank IFSC code: _____

Bank Name: _____ Branch: _____

Yours faithfully,

Office Clerk Receiver's Signature Signature of the student

- **Forms should be submitted between the mentioned dates in notice along with Original Fee receipts of previous three years (FY to TY) & two years of (MCOM part 1 & 2 & ABC ID XEROX**
- **Bank details must be filled correct and the copy of the passbook has to be enclosed. Any discrepancy found; refund will be cancelled.**

Library Department: - the student has returned the Identity Card and Library Card and has no dues.

Date: - _____ Signature of the Librarian

Acknowledgment

Name of the student: - _____
Class: - _____Div: _____Student UID NO.: _____Year _____
Refund of Deposit Rs. _____.

Signature of Clerk