APPLICATION FOR CANCELLATION OF ADMISSION (Please attach original of Fee Receipt) ACADEMIC YEAR 2017-2018

		Date:_	Date :	
From: Name of the Student:	Shri / Smt. / Kum.			
(In Block Letters) Name)	(Surname) (Own Name)	(Father's/Husband's Name)	(Mother's	
Residential Address (A	as registered in the Nagindas Khan	dwala College record) :		
Pin Code :	Tel. No0	Class:		
Academic Year 201 to	201 Div. : Roll No. : Fee	Receipt No & Date	:	
The Principal, Nagindas Khandwala Co Commerce, Arts & Mana Shantaben Nagindas Kha Bhadran Nagar, Road No Off. S.V. Road, Malad (W MUMBAI – 400 064.	gement Studies And andwala College of Science, b. 1,			
Madam,				
I Secured admission	to the		Class in your	
College on	I would like to cancel it	due to the following reason	ons:	
 I am returning my I request you to kindly re 	riginal copy of the Fee Receipt. (No Identity Card and Library Card. turn my Original Marksheet / Passing C			
admission to the above cla	ss in the college.			
Thanking you, Yours faithfu		fully,		
(Signature of the Parent)		(Signature of t	(Signature of the Student)	
To cancel the Ad	on may be given dmission as desired e student			
Concerned Clerk	Permitted to cancel Admission the necessary notings are made in the relevant documents			
Librarian Signature	Superintendent (Admn.) / Head C	lerk Superintende	ent (F & A)	

Please refer to the Prospectus for the Rules of Refund. Students are requested to attach Photo Copies of Fee Receipts alongwith the application. You are requested to return your original I-Card of the college.