



# **DHA SUFFA UNIVERSITY**

Off Khayaban-e-Tufail, Phase – VII (Extension), DHA, Karachi – 75500

## **Request Form for Withdrawal/Admission Cancellation**

### **Part – A - To Be Filled by Student/Parent/Guardian**

Registration No.		Semester /Year in which admitted:	
Name:		Current Semester:	
Discipline:		Contact #:	

**Students/Parents/Guardians are requested to read and understand fee refund policy before signing below:**

Parent's/Guardian's /Payee's name with signature	Student's signature
Name: _____	Signature: _____
Signature: _____	
Date: _____	Date: _____

**Fee Refund Policy:** As per HEC letter No.10-1/HEC/A&C/2012/94 of 11<sup>th</sup> Sep 2012, Admission Fee shall not be refunded. Caution Money and full amount of Tuition Fee (other than Admission Fee) will be refunded if applied till the 7<sup>th</sup> day of the start of classes. Caution Money and 50% of the Tuition Fee will be refunded, if applied after 7 days but between 8<sup>th</sup> – 15<sup>th</sup> day of start of classes. Only Caution Money will be refunded, if applied after 15<sup>th</sup> day of the start of classes.

### **Part – B – To be processed by Registrar's Office**

**Reason for Withdrawal/Admission Cancellation** (Please tick the applicable):

1. Failed to meet admission eligibility criteria	<input type="checkbox"/>	Remarks: _____
2. Voluntary withdrawal	<input type="checkbox"/>	
3. Expelled from University on disciplinary ground	<input type="checkbox"/>	

1. Recommendation by HOD  Signature: _____	Recommended <input type="checkbox"/>
	Not Recommended <input type="checkbox"/>
2. Recommendation by Dean  Signature: _____	Recommended <input type="checkbox"/>
	Not Recommended <input type="checkbox"/>
Reason: _____	

Approved by Vice Chancellor

Signature: \_\_\_\_\_

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

Form received on \_\_\_\_\_ by Registration Department

Part – C - Clearance – To be processed by Registrar’s Office

1. HoD _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
2. Library In-charge, DSU _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
3. Library In-charge, DCL (for member only) _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
4. Admin Office _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
5. Hostel Warden’s Office _____	Approved (Nothing outstanding) <input type="checkbox"/> Date of Admission in the Hostel: _____ Date of Leaving the Hostel: _____
	Not Approved <input type="checkbox"/> Remarks: _____
6. Controller of Examination _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
7. Finance Office _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
8. Dean’s Office _____	Approved (Nothing outstanding) <input type="checkbox"/>
	Not Approved <input type="checkbox"/> Remarks: _____
9. Registrar Office: _____	Record Verified            Yes / No
	ID Card Recovered        Yes / No

**Part – D - For Finance Office Use Only**

(To be processed/completed only after completion of Parts A, B & C)

Fee Deposited		Fee/Dues Remaining		Amount Refundable
Fee Type	Amount	Type	Amount	
	Rs.		Rs.	<input type="checkbox"/> Net Dues: _____ <input type="checkbox"/> Net Refund: _____ Date: _____ Signature: _____ (Manager Finance)
	Rs.		Rs.	
	Rs.		Rs.	
	Rs.		Rs.	
	Rs.		Rs.	
<b>Total</b>	<b>Rs.</b>	<b>Total</b>	<b>Rs.</b>	

**Fee Refund Approved by Vice Chancellor**

Signature: \_\_\_\_\_

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



