

Application for Cancellation of Admission

(to be filled in duplicate)

Date : ____/____/2011

To.
Competent Authority,
Pravara Institute of Medical Sciences,
Loni (BK), Tal : Rahata, Dist : Ahmednagar
Pin : 413 736 (Maharashtra)

Subject : Cancellation of Admission.

Respected Sir,

I,
PIMS-AICET- UG 2011 Hall Ticket No.:and Merit No. :
was admitted to MBBS / BDS course at
college on/...../2011 undercategory.

Now I wish to cancel my admission since

- 1) I have secured admission through another Competent Authority forcourse in another college.
- 2) I wish to cancel it for personal reason/s.

I hereby request you kindly return my original documents and the amount of fees that I am entitled for as per University rules.

Thanking You,

Yours faithfully

Signature of Candidate

Signature of Parents/Guardian

<p>Name & Address of candidate : Pin Code : Tel. No.</p>
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<p>For office use only: Amount Paid ` : Amount deducted ` : Amount refunded ` : Cheque No. & Date. Bank particulars :.....</p>
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- Enclosure : 1. Original copy of Admission Letter,
2. Original fees receipts**