



Tapeshwar Dharmeshwar Prasad Vidhi Mahavidyalay

College Code: 962

Gangaupur, Madhuban, Mau (U.P.) 221603

Affiliated to Maharaja Suhel Dev State University, Azamgarh & Approved By Bar Council of India.

Ref. No. TDPVM/2026/19

FEE REFUND NOTICE

All students are hereby informed that the fee refund shall be processed as per UGC norms and college rules.

Students who wish to withdraw their admission must submit a written Fee Refund Application along with the following documents:

- * Fee Payment Receipt
- * Admission Letter / Enrollment Proof
- * Valid ID Proof
- * Bank Account Details

The refund amount will be calculated according to the UGC Refund Policy and applicable deductions. Applications must be submitted within the prescribed time limit. Incomplete applications will not be entertained.

For detailed guidelines, please visit the college website or contact the College Office.

By Order

Principal: Tapeshwar Dharmeshwar Prasad Vidhi Mahavidyalaya

Website: www.tdpvm.com

FEE REFUND APPLICATION FORM

1. Student Details

Student Name: _____

Father's / Mother's Name: _____

Course / Program: _____

Year / Semester: _____

Enrollment / Roll Number: _____

Mobile Number: _____

Email ID: _____

2. Admission Details

Date of Admission: _____


Principal

Tapeshwar Dharmeshwar Prasad
Vidhi Mahavidyalaya
Gangaupur, Madhuban, Mau (U.P.) 221603



- 91 9450758085



www.tdpvm.com



tdplawcollege@gmail.com



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Amount of Fee Paid: _____

Mode of Payment (Cash / Online / DD / UPI): _____

Receipt Number & Date: _____

3. Refund Details

Reason for Fee Refund:

Amount Requested for Refund: _____

4. Bank Details for Refund

Account Holder Name: _____

Bank Name: _____

Account Number: _____

IFSC Code: _____

Branch Name: _____

5. Declaration

I hereby declare that the information provided above is true and correct. I request the college administration to kindly process my fee refund as per rules.

Date: _____

Place: _____

Student Signature: _____

For Office Use Only

Application Received Date: _____

Documents Verified: Yes / No

Approved Refund Amount: _____

Authority Signature & Seal: _____

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Principal

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