For Office Use Only	Sr. No
	Date:



# SANT LONGOWAL INSTITUTE OF ENGINEERING & TECHNOLOGY LONGOWAL, DISTT. SANGRUR

(DEEMED TO BE UNIVERSITY U/S 3 OF UGC ACT 1956)

<b>APPI</b>	LICAT	ION	FOR
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1. Refund of Caution Money (To be deposited in Account Section within 3 year from the pass of last exam)

2. Admission Category (Please Tick One Option) PMS (SC Punjab) / PMSSS / TFW /OBC /GEN

Note: PLEASE FILL UP THE FORM IN CAPITAL LETTER

	CAPTIAL LETTERS)		(IN CAPTIAL LETTERS)				
Previous Registration No. in case of Pro	omote	Registr	ation No.	. in case o	f Direct Entry		
Discipline Trade Registro	ration No. Batch	Disc	ipline	Trade	Registration No.	Batch	
Certificate		Certific	ate				
(if promoted to Diploma)							
<b>Diploma/ICD</b> (if promoted to Degree)		Diplom	a/ICD				
Degree		Degree	!				
Last Exam passed			- 4				
(Month & Year)		PG/ME	SA/PhD				
Current Registration No (If Presently St	tudying in SLIET):		ı		I	l	
orrespondence Address  On which the Caution Money is to be se							
			Account	No	IFSC Code		
Caution Money may please be transferred in	n My Central Bar	nk of India					
SB A/C	Other Bank	(					
inclose:  1. Please attach Photocopy of your (Where Account No, Name, Branda Copy of Notice (In Case of Name)	ch Address & IFSC Code is	s mentioned)			Signature Wir	e of Stud	
The above student is going to leave the I	Institute, Please me	ention if an	thing du	e against	him/her. In case no	thing du	
		ention if any	thing du	e against	him/her. In case no	thing due	
The above student is going to leave the I against the student please write "No-Duo		ention if any	thing du	e against	him/her. In case no	thing due	
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		ention if any	thing du	e against	him/her. In case no	thing du	
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#### **ACCOUNT SECTION**

## **NO DUES CERTIFICATE**

Name o	of Department						
		Lab-1	Lab-2	Lab-3	Lab-4	Lab-5	Lab-6
1.	Concerned Department Labs./	Lab-7	Lab-8	Lab-9	Lab-10	Lab-11	Lab-12
	Workshop		Workshop	Workshop	Workshop	Workshop	Workshop
			•			•	
Sr. No.	Department		Dues if any	No-Dues	Signatu Dealing		Sign. Of HOD/ Section In charge
2.	Concerned Departme Ref. to Sr. No. (1) abo (To which the student was admitted	ve					

Library

Boys/Girls Houses

**Sports Department** 

**Academic Section** 

N.C.C (For Degree only)

Scholarship Cell Applicable in case of -PMS (SC Punjab) / PMSSS / TFW

(Hostler / Day Scholar)
Please Tick

3.

4.

5.

6.

7.

8.

	PRE-	-RECEIPT		
r, Sant Longowal Institute of	Engineering & Techno			•
			Signature on Revenue Stamp	Revenue Stamp
r	, Sant Longowal Institute of	d a sum of Rs(Rupees	, Sant Longowal Institute of Engineering & Technology, Longowal or	d a sum of Rs(Rupeesor , Sant Longowal Institute of Engineering & Technology, Longowal on account of Caution Money thro

Registration No.....

#### **ACADEMIC SECTION**

## **NO DUES CERTIFICATE**

Name of	f Department	
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	Concerned Department Labs./ Workshop	Lab-1	Lab-2	Lab-3	Lab-4	Lab-5	Lab-6
1.		Lab-7	Lab-8	Lab-9	Lab-10	Lab-11	Lab-12
	Trononop	Workshop	Workshop	Workshop	Workshop	Workshop	Workshop

Sr. No.	Department	Dues if any	No-Dues	Signature of Dealing Hand	Sign. Of HOD/ Section In charge
2.	Concerned Department in Ref. to Sr. No. (1) above (To which the student was admitted)				
3.	Library				
4.	Boys/Girls Houses  (Hostler / Day Scholar)				
5.	Sports Department				
6.	N.C.C (For Diploma & Degree)				
7.	Scholarship Cell Applicable in case of -PMS (SC Punjab) / PMSSS / TFW				
8.	Academic Section				

Signature of Student
Name
Registration No
Roll No

## **STUDENT COPY**

# **NO DUES CERTIFICATE**

ment

		Lab-1	Lab-2	Lab-3	Lab-4	Lab-5	Lab-6
1.	Concerned Department Labs./ Workshop	Lab-7	Lab-8	Lab-9	Lab-10	Lab-11	Lab-12
	Workshop	Workshop	Workshop	Workshop	Workshop	Workshop	Workshop

Sr. No.	Department	Dues if any	No-Dues	Signature of Dealing Hand	Sign. Of HOD/ Section In charge
2.	Concerned Department in Ref. to Sr. No. (1) above (To which the student was admitted)				
3.	Library				
4.	Boys/Girls Houses  (Hostler / Day Scholar)				
5.	Sports Department				
6.	N.C.C (For Diploma & Degree)				
7.	Scholarship Cell Applicable in case of -PMS (SC Punjab) / PMSSS / TFW				
8.	Academic Section				

Signature of Student
Name
Registration No
Poll No

# **RTGS DETAIL**

#### **FILL ALL THE DETAIL IN CAPITAL LETTERS**

NAME OF STUDENT	
TRADE/REGN. NO.	
FATHER NAME	
PERMANENT CONTACT NUMBER	
BANK NAME	
STUDENT BANK ACCOUNT NO.	
IFSC CODE	

The particular mentioned above are correct and undertake to bear any loss of transaction through RTGS personally.

SIGNATURE OF STUDENT