

To,

The Honourable Vice Chancellor
Peoples University of Medical
& Health Sciences for Women,
Shaheed Benazirabad

SUBJECT: REFUND OF SELF-FINANCE AMOUNT

R/Sir,

With due respect, I apply for admission in _____ for the admission session 2023-24 at PUMHSW-Shaheed Benazirabad.

I have not qualified for the admission due to lower percentage _____ from District _____.

It is therefore requested to your kind honour to kindly refund the amount of deposited Pay Order / DD No: _____ Dated: _____ issued from Bank / Branch & City _____.

The crossed cheque may be issued in favour of _____ holding CNIC No: _____.

I will not claim admission on vacant seat in future even if selected.

Thank you for your co-operation

Yours obediently,

Dated: _____

Miss. _____

D/o: _____

Merit List No. _____

District: _____

DOCUMENTS REQUIRED

Candidate CNIC

Father CNIC

Pay order photo copy

Application for favour of cheque