

Dated: _____

To,

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

SUBJECT: **REQUEST FOR REFUND OF Rs. _____.**

Respected Sir,

I had applied for admission in _____ (Self-Finance) program for the session: 2025-26 and submitted a Demand Draft No. _____, issued from Bank/Branch _____ dated: _____ amounting to Rs. _____ against a district _____ seat. However, due to my low percentage, I was unable to secure admission.

Therefore, I kindly request you to process the refund of Rs. _____ to Account No/IBAN. _____, Account Title _____, Bank/Branch _____ OR issued a crossed cheque in favor of my _____, name: _____. Additionally, I formally withdraw from the admission process and waive any future claim to admission, even if my turn arises.

Thank you for your co-operation

Yours obediently,

Signature: _____

Miss. _____ D/O _____

Relationship with Account Holder: _____ Merit List No: _____

District _____ Contact No: _____.

FOR OFFICE USE ONLY

Remarks by Admission Section: _____

Remarks by Receipts Section, DOF: _____

Approved by: _____ / _____ / _____
Director Finance / Registrar / Vice Chancellor