



University of Kashmir, Srinagar.

NAAC Accredited Grade "A+"

Office of the Dean Academic Affairs

Application form for cancellation of Admission

Name of the Candidate _____

Parentage _____

University Registration No. _____

Name of Programme _____ Date of Joining _____

Details of fee deposited _____

Reasons/Justification for cancellation of admission _____

Reasons/Justification for refund of fee _____

Date _____

Signature of Candidate

Contact No: _____

Remarks/Recommendations of HOD _____

Seal & Signature
Head of the Department

Verification/Report of the office of DAA _____

DA

SO

AR

JR

Approval/Authorization of the DAA