

Himachal Pradesh University
(NAAC Accredited "A" Grade University)
"Entrance Tests Section"
Summer Hill, Shimla-171005

No. HPU(MBBS/BDS-Refund)ET/2020

Dated:05.05.2021

NOTICE FOR REFUND OF TOKEN AMOUNT OF FEE DEPOSITED BY THE CANDIDATES DURING ONLINE COUNSELLING FOR ADMISSION TO MBBS/BDS COURSES FOR THE ACADEMIC SESSION-2020-21.

In continuation to this office notice of even no. dated 26.04.2021, the date for submission of form (**Appendix-27**) with regard to refund of token amount of fee, which was deposited during online counselling process of MBBS/BDS courses for the academic session 2020-21 is hereby extended **upto 31.05.2021**. In view thereof, the candidates those entitled for refund of aforesaid token amount of fee as per provisions of the prospectus, may send their form (**Appendix-27**) duly filled by email: arentrancetests919@gmail.com **upto 31.05.2021**. For any query, please contact on 0177-2830891, 2833588.


Controller of Examinations-cum- Member Secretary,
Centralized Counselling Committee (MBBS/BDS-2020)

Dated: 05.05.2021

Endst.No.Even:

Copy for information is sent to:-

1. The Director Medical Education & Research, H.P.-cum-Chairman, Centralized Counselling Committee, Shimla-9 .
2. SPS to Vice-Chancellor/Registrar/COE, HPU Shimla-5.
3. The Webmaster/Incharge, H.P. University websites www.hpuniv.ac.in & [URL:https://hp.online-counselling.co.in/](https://hp.online-counselling.co.in/) for uploading the above notice on the University website today positively.


Assistant Registrar(Ent.Tests)



APPENDIX-27

**FORM FOR REFUND OF TUITION FEE DEPOSITED BEFORE ALLOCATION OF SEAT
FOR THE ACADEMIC SESSION 2020-21**

(To be submitted by the candidate to the Assistant Registrar(Entrance Tests) H.P.
University, Summer Hill, Shimla-171005)

1. Name of candidate : _____
2. Father's Name " : _____
3. NEET-UG-2020 Roll No. : _____
4. Marks of NEET-UG-2020 : _____
5. HPU Merit Rank : _____
6. Have you allocated any of the Medical/Dental College(Yes/No)_____
6. If Yes, name of allocated college : _____

7. Date of online counseling round wherein the college was allocated : _____

8. Amount of tuition fee deposited : _____
Receipt No. _____ Date _____
9. Bank Account No. of candidate only _____
10. IFSC Code No. _____ Name of Bank _____
11. Mobile No. _____
12. Any other information: _____

I hereby declare that I have not taken admission to MBBS/BDS course in any of the Medical/Dental College after allotment of seat. As such, the amount of tuition fee as deposited by me before allocation of seat may be refunded to me as per provisions of the prospectus.

(Signature's of Parents/Guardian)

(Signature's of candidate)

Date: _____