



SIES

RISE WITH EDUCATION

College of Arts,
Science & Commerce
(Empowered Autonomous)

AFFILIATED TO UNIVERSITY OF MUMBAI - NAAC REACCREDITED - 'A' GRADE

26-09-2025

NOTICE

REFUND OF DEPOSIT 2024 - 2025

Students of Third Year Classes in the year **2024 – 2025** are eligible for refund of deposit Amount.

CLASS	DATE	TIME
TY BA	06 OCTOBER 2025	10.30 A.M. TO 12.30 P.M
TY BSC & TY BCOM	07 OCTOBER 2025	- DO -
M.SC-P-II (ALL SUBJECT)	08 OCTOBER 2025	- DO -
TY BMM, BMS, CM, BSC-IT, CS, BT, DS, EVS	09 OCTOBER 2025	- DO -

Duly filled refund form should be submitted along with following documents. Refund form can be downloaded from the college website 'siesascs.edu.in'

1. Refund will be made by **NEFT** transfer in the student / Parent's bank account only.
2. Submit a photocopy of the cheque slip of the student / parent's bank account.
3. Original fees receipt of first year (2022-2023) and / or photocopy of marksheet of all 6 semesters.
4. Carry photocopy and original of Third Year Class Identity Card.




I/C. PRINCIPAL

APPLICATION FOR SEEKING REFUND OF DEPOSITS PAID AT THE TIME OF ADDMISSION

Date:-

NOTE:

- a) Refund of deposit/s, will be made by **NEFT** transfer in the students 'or parents' bank account only.
- b) Submit a photocopy of the **cheque slip** Or first page of the **bank pass book** with all the relevant details like bank name, branch, IFSC code, etc, printed.
- c) Name of the account holder as per bank details provided in point (b) above (Write in CAPITAL letters)

- d) No Refund will be made without submission of **ORIGINAL DEPOSIT RECEIPT** along with this application.

Mr. / Ms. _____

Mobile 1. _____ 2. _____

To,
The Principal,
SIES College of Arts, Science & Commerce,
Sion (West), Mumbai 400 022.

Madam,

I have cleared Graduation / Post Graduation from your college and my college details are as follows.

FY CLASS:- _____ DIV: _____ ROLL NO: _____ Academic Year _____

SY CLASS:- _____ DIV: _____ ROLL NO: _____ Academic Year _____

TY CLASS:- _____ DIV: _____ ROLL NO: _____ Academic Year _____

MSC – PART I:- _____ DIV: _____ ROLL NO: _____ Academic Year _____

MSC – PART II:- _____ DIV: _____ ROLL NO: _____ Academic Year _____

I request you to release my Deposits paid by me. I enclose herewith ORIGINAL Receipt of Deposits along with this application.

Regards

Yours faithfully

Signature of the student:- _____

Name of the student:- _____

ACKNOWLEDGEMENT FOR RECEIPT OF APPLICATION FOR DEPOSIT REFUND

Received application for refund of Deposit/s from Mr. / Ms. _____

Class:- _____ Div:- _____ Roll No:- _____

Date:-

Recipients' Signature