



**ADMISSION CANCELLATION FORM**

The Principal  
 Usha Pravin Gandhi College of Arts, Science and Commerce.

SAP NO. \_\_\_\_\_

Madam,

Full Name of Candidate : \_\_\_\_\_

Address : \_\_\_\_\_

Tel/Mob. No.: \_\_\_\_\_

Course : \_\_\_\_\_ Date of Admission : \_\_\_\_\_

\* Amount of fee paid : Rs, \_\_\_\_\_ Fee Receipt No. : \_\_\_\_\_  
 (\*Subject to clearance of D.D.) (Original Receipt Attached)

I request you to kindly cancel my admission and return my original documents.

❖ Reason for Cancellation : \_\_\_\_\_

Received the following original documents from the Admission Authority.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

\_\_\_\_\_  
 Signature of the Parents

\_\_\_\_\_  
 Signature of the Candidate

Signature of Chairperson Admission Committee : \_\_\_\_\_ Date : \_\_\_\_\_

Cancellation No. : \_\_\_\_\_ Date : \_\_\_\_\_

Signature of Registrar / Office Superintendent : \_\_\_\_\_ Date : \_\_\_\_\_

Signature of Clerk \_\_\_\_\_ Date : \_\_\_\_\_

**ACKNOWLEDGEMENT**

Received Application for Cancellation of Admission from

Mr./Miss : \_\_\_\_\_ Dated \_\_\_\_\_

Course : \_\_\_\_\_

Signature of Clerk : \_\_\_\_\_ Date : \_\_\_\_\_

