

To  
The  
Shambhunath Institute of Pharmacy  
Jhalwa, Prayagraj  
Uttar Pradesh.

Date:- 11 June 2021

Sub: Application for Fee concession.

Sir,

With due respect, I state that I am a student of your Institute my name is Shantanu Tiwari from the Pharmacy department, Id - 19Phar0252. I request you to grant me some fee concession as conditions are not good due to covid-19 pandemic.

I will be highly obliged if my request can be kindly considered.

Thanking you

Yours obediently,

Shantanu Tiwari

Pharmacy Department

Id - 19Phar0252

15/6/21  
K. K. Tewari  
11.6.21

Contract Review

P.R. - give abstract of  
Bla... (Rottend)  
or → R.R. to K.K. Tewari  
Sir,

11.6.21