

Form No **5463**
Date **30/7/25**

Student ID: **25MCAB0015**

Name: **Raj Tripathi**

Father's Name: **a**

Address: **a**

a

Mobile No:

9839

Course:

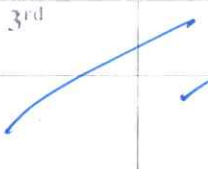
MCA

Total College Fee:

➤ If scholarship is not released, you have to pay following fee:

Year	1 st	2 nd	3 rd	4 th
Total Fee	50000/- (EF+PE)	50000/- (EF)	X	X
Note: University Fee As Per Norms				

➤ If scholarship is released, you have to pay following fee:

Year	1 st	2 nd	3 rd	4 th
Total Fee				
Note: University Fee As Per Norms				

Fee submitted (at the time of admission): **full fee will be paid up to Del. with release**

First Installment: **x**

Second Installment: **a**

Third Installment: **a**

Student's Signature

Guardian's Signature

Authorized Signatory

Admission Cell