

**THE BOMBAY SUBURBAN GRAIN DEALERS' JUNIOR COLLEGE PF COMMERCE,
ARTS AND SCIENCE
APPLICATION FOR REFUND OF LIBRARY DEPOST AND LAB DEPOSIT FOR THE YEAR**

DATE: _____

**TO.
PRINCIPAL,
THE B.S.G.D. JUNIOR COLLEGE OF
COMMERCE, ARTS & SCIENCE
BHADRAN NAGAR ROAD NO 1,
OFF S V ROAD, MALD (W),
MUMBAI- 400 064.**

PLEASE
PASTE
STAMP
SIZE
PHOTA

Respected Madam,

I hereby request you to refund of my Library Deposit & Lab Deposit for

the year _____ My details are as under:

Name of Student: _____
(Surname) (Name) (Middle Name) (Mother Name)

G.R.NO: _____

Library Deposit _____ + Caution Money _____ + Lab Deposit _____ = Total _____

F.Y.J.C. ROLL NO: _____ DIV: _____ YEAR _____

S.Y.J.C. ROLL NO: _____ DIV: _____ YEAR _____

RESIDENTIAL ADDRESS: _____

PHONE NO: (R) _____ MOBILE NO _____

SIGNATURE OF THE STUDENT

SIGNATURE OF THE PARENT

NOTE: Please attach your I.T. DEPOSIT ORIGINAL FEES RECEIPT AND REGULAR FEES RECEIPT