

Ref. No: SU/R/2018/1401-7

Date: 06.11.2018

To

DR Ridhi Aggarwal F/O DR. DINESH AGGARWAL C-11/9, Model Town-III, Delhi-110009

Subject: Fee Waiver Scheme

After going through your application for fee waiver the committee has recommended 10% fee waiver on your fee.

SI No	Name of The Student	Course	Batch	% of Discount	Amount of Discount
1	Ridhi Aggarwal	MDS- Orthodontics	2018-19	10	70000

Copy to

1. Finance Officer

