

F. No: SU/R/2019/319-5

Date: 16.03.2019

To

SOFIYA SHAHID 110 A Gyan Khand IV Indirapuram Ghaziabad, U.P. - 201010

Subject: Fee Waiver Scheme

After going through your application for fee waiver the committee has recommended 5% fee waiver on your fee.

SI No	Name of the Student	Course	Batch	% of Discount	Amount of Discount
1	SOFIYA SHAHID	MBBS	2017-2018	5	35000

Copy to

1. Finance Officer

