

**Program Fee Remittance Form**

Name of the Applicant \_\_\_\_\_ Application No. \_\_\_\_\_

Name of Program \_\_\_\_\_ Faculty/Department \_\_\_\_\_ Session: \_\_\_\_\_

Please find enclosed herewith an Account Payee Demand Draft in favor of 'The ICFAI University, Himachal Pradesh'.

The detail is indicated below:

**Program Fee**

S. No.	Fee Detail	Fee for Semester- I (Rs.)
1	Caution Deposit (Refundable as applicable)	
2	Program Fee (Semester I)	
3	<b>Examination Fee (Per Semester)</b>	<b>1,000</b>
4	<b>Alumni Association Membership fee (One time at the time of the Last Semester)</b>	<b>1,500</b>
5	<b>Convocation Fee (One time at the time of the Last Semester)</b>	<b>3,000</b>
	Total	

**Note: The last date for the Payment of the 1<sup>st</sup> Installment of the Semester Fee is August \_\_\_\_\_.**

Payment Detail:

Bank Name/Online Payment App. Name	Mode of Payment (DD/Cheque/ Bank Deposit/ Online Transaction)	DD No./Cheque No. / Bank Receipt No. / Online Transaction ID	Date	Amount

Date: \_\_\_\_\_

\_\_\_\_\_  
**Signatures of the Student**

**Note: Please write your Name and Application Number on the back side in case of DD/Cheque etc.**