



# HAMDARD UNIVERSITY

## HARDSHIP FEE CONCESSION FORM

**Student's Information:-**

CMS ID : \_\_\_\_\_ Student Name : \_\_\_\_\_ Father's Name : \_\_\_\_\_

Faculty : \_\_\_\_\_ Program: \_\_\_\_\_ Enroll. No : \_\_\_\_\_ Current Semester : \_\_\_\_\_

Contact No: \_\_\_\_\_ Email: \_\_\_\_\_

Required Concession (%) \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student's Signature & Date : \_\_\_\_\_

Verified by Director/Principal/HOD : \_\_\_\_\_

**FOR CONCESSION COMMITTEE USE ONLY**

Approved

Rejected

Approved Concession (%) \_\_\_\_\_

Remarks: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Convener  
Signature

\_\_\_\_\_  
Member 1 (Name)  
Signature

\_\_\_\_\_  
Member 2 (Name)  
Signature

\_\_\_\_\_  
Member 3 (Name)  
Signature

\_\_\_\_\_  
Vice Chancellor  
Signature & stamp

**FOR SFC USE ONLY**

Remarks : \_\_\_\_\_

Verified by (Name) : \_\_\_\_\_

Signature & Stamp:- \_\_\_\_\_

**Posted By:**

Concession No:- \_\_\_\_\_ Concession Amount:- \_\_\_\_\_ Applied Session:- \_\_\_\_\_

Name:- \_\_\_\_\_

Signature & Stamp:- \_\_\_\_\_

- Attachments:
1. CMS Ledger
  2. All supporting documents based on reason