

APPLICATION FOR SECURITY DEPOSIT REFUND

Name of the Student: Master / Miss	Class & Section	
Father's Name: Mother's Name:		
Date & Class of Admission		
Amount of Security Deposit paid of Figures: _	In words:	
Last fee paid on :	Amount :	
Account Name in which amount to be transferred : (ONLY PARENT NAME)		
Bank Name : Acc	count No:	
IFSC Code: Bra	anch :	
Tel. No: E-	- mail ID of the Parent :	
I hereby agree to have the Refund transferred to my bank account as above.		
Signature of Father with Date		
Signature of Mother with Date		
Along with this form, the following documents are required for claiming Security Deposit:		
-	oove account (Account holder's name should be printed on the	
	receipt (if not available an affidavit to be produced) ot (if not available copy of bank statement to be produced)	
<u>Note: Security Deposit money will</u> <u>through NEFT</u>	<u>be transferred to your mentioned A/C after collection of TC</u>	



AMBER INTERNATIONAL SCHOOL

88Hissa No.5/2, Dhokali Village, Thane -W Tel: 7304387390 Email id-info@amberschool.edu.in

ACKNOWLEDGEMENT RECEIPT		
	Date	
Name of the Student: Master / Miss	Class & Section	
 Following documents have been received from Mr. /Mrs		

Receiver's Signature with date _____