

## REQUEST FORM

**First Name : AKSHAY GIRISH**

**Last Name : GIRISH**

**Address : KARIPPALLIMALAYIL**

**VADAKARA, KOTTAYAM**

**PIN:686605,KERALA,INDIA**

**Program of Study : Economics and management of public administration**

**Year of Study : 2024-2025**

**I hereby student request for** Refund of tuition fee

**Please state full reasons for your request** Due to visa rejection



Student signature

Vice Dean for Education: **I approve – I do not approve**

Vice Dean for International Relations and Development: **I approve – I do not approve**

Dean's statement: **I agree – I do not agree**