

"REFUND OF DEPOSITS"

All students in the last trimester of final year of their course to fill the form giving their bank account particulars to enable the University to remit the amount of deposits with University. Please ensure that all particulars filled are correct before clicking 'UPDATE DATA'. This should be updated before the last date of their course. Please read the instructions before filling up. The login to be done by the student by entering his Student Permanent No. [10 digit- will be found on your fee receipt] and date of birth. The refunds will processed within 4 – 5 weeks after convocation subject to clearances from all departments.

FIRST SCREEN:

FW: Adobe production form for RTGS bank details capturing - Message (HTML)

FICA_Production (2).pdf - Adobe Reader

File Edit View Window Help

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Tools Sign Comment Extended

Please fill out the following form. You can save data typed into this form. Highlight Existing Fields

Important Instruction

- 1) This form is in the adobe format and you need to have adobe reader (Version 8.1 or higher) installed on your laptop or Desktop to be able to read this form.
- 2) If your computer does not contain (Version 8.1 or higher) adobe reader software, you can freely download it from the link (http://www.sykm.ac.in/AdbeRdr933_en_US.exe)
- 3) After installing the version 8.1 or above of adobe reader, download the application form from the website & open it. Go to the Edit option and click on preferences. From categories, select security (Enhanced) and uncheck Enable Enhanced Security. Click on OK

BANK DETAIL UPDATION FORM

Student Permanent Number

Date Of Birth(dd.mm.yyyy)

SUBMIT

Click on Sign to add text and place signature on a PDF File.

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SECOND SCREEN :

FW: Adobe production form for RTGS bank details capturing - Message (HTML)

FICA_Production.pdf - Adobe Reader

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Tools Sign Comment Extended

Some features have been disabled to avoid potential security risks. Only enable these features if you trust this document.

BANK DETAIL UPDATION FORM

Student Permanent Number 1000063942 Date 12/06/2013

Beneficiary Name*
Beneficiary name should be student own name or parents name, no other name will be allowed.No Mr./Mrs./Dr. or no special character like dot or hyphen (. -)

Bank name **Branch***
Enter Full bank name not Short form Enter full Branch name eq BORIVALI-(W)

Beneficiary Account No*. **Type of Account***
If account No Begin with Zero enter zeros also.

IFSC Code* **Payment Type***

Country **State**

City **Email Id**

8TH FLOOR, MITHIBHAT COLLEGE,
V.L. MEHTA ROAD, VILE PARLE - (W)

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