



FEDERAL BOARD OF INTERMEDIATE AND SECONDARY

EDUCATION H-8/4, ISLAMABAD

Phone No: 051-111 032 473

(FM-QSP/15-06-00)



APPLICATION FORM FOR REFUND OF FEE

Reporting Branch: _____

Dated: _____

Name of Candidate		Father Name	
Roll No/Year		Registration No	
Bank Challan No (Copy enclosed)		Amount	
Purpose of Fee		Date	
Reason for refund:			

ACCOUNT HOLDER DETAILS

Please provide valid Raast ID (link with CNIC and registered bank account)

Name of Beneficiary		Relation	
CNIC No. (Copy enclosed)		Raast ID.	
Account Title		Name of Bank	
IBN A/C No.		Mobile No.	

Applicant's Signature _____

Contact No _____

Address _____

Note:

- Amount less than Rs. 500/- (Rupees Five Hundred Only) should not be refunded.
- No Cheque issued without Bank account holder.
- Kindly fill out the application completely. Incomplete applications will not be entertained.

FOR OFFICE USE ONLY

Recommendation:

- Service has not been provided, therefore the above said fee is recommended to be refunded.
- In case of any change in marks/discrepancy, the recounting fee (90%) shall be refunded to the candidate(s) for that paper(s).

Dealing Assistant

Superintendent

Sectional Head/HOD

Bank draft/ Challan has been deposited into Board's account No. _____ Through Bank

Challan No _____ dated _____ Rs _____.

Remarks (if any): _____

Dealing Assistant

Accountant

AS (F)

DS (F)

An amount of Rs. _____ May be approved on account of refund of fee after deduction of service charges, please.

Secretary

DS (F)

Cheque No. _____ Dated _____ Amount _____

Received by _____

Accounts Assistant

Accountant