



Bank Copy

ICICI Bank

LYALLPUR KHALSA COLLEGE OF ENGINEERING
CANTT ROAD, JALANDHAR

Branch Sol Id :	
Account To be Credited : 0 0 3 6 S L F E E C O L	
Name of Branch :	
Date of Deposit :	
Institution Name : FCLKCE	
Student's Name :	
Father's Name :	
Mobile :	
Class Roll No. :	
University Roll No. :	
B. Tech : Regular/Leet	
CE <input type="checkbox"/> CSE <input type="checkbox"/> ECE <input type="checkbox"/> ME <input type="checkbox"/>	
SEMESTER : I <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> IV <input type="checkbox"/>	
V <input type="checkbox"/> VI <input type="checkbox"/> VII <input type="checkbox"/> VIII <input type="checkbox"/>	
	Amount
Course Fee <input type="checkbox"/>	
Exam Fee (Reppear) <input type="checkbox"/>	
Revaluation Fee <input type="checkbox"/>	
Fine <input type="checkbox"/>	
Any Other Fee (PI Specify) <input type="checkbox"/>	
TOTAL	
CASH DEPOSIT DETAILS	
Details	Amount
X 2000	
X 500	
X 200	
X 100	
X 50	
X 20	
X 10	
Other	
TOTAL	
DD / CHEQUE DETAILS	
Date :	
DD / Cheque No.	
Bank Name :	
Amount :	

- * All Fields are Mandatory
- * Above mentioned details are correct and I will be fully responsible for any misrepresentations
- * **Fee Deposit Schedule**
1st/3rd/5th/7th Semester 10th May to 25th May
2nd/4th/6th/8th Semester 25th Nov. to 10th Dec.
Fine Rs.200/- per week after Due Date

Depositor Signature

Bank Signature & Seal



Institute Copy

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Student's Copy

ICICI Bank

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