



# Sir Syed CASE Institute of Technology (SS CASE IT)

Street 33, Sector A, Multi Garden, Sector B 17, Islamabad

Tel: 051 5203471, Fax: 8314660, www.sscit.edu.pk

## Fee Installment Form

CASE Roll No: \_\_\_\_\_

Name: \_\_\_\_\_  
First Middle Last

Tel. No: \_\_\_\_\_

### Program

- BSEE.
- BSCS
- BBA
- MS
- PhD

### Department

- Elect & Computer Engineering
- Engineering Management
- Management Sciences
- Computer Sciences

Semester:  Spring  Summer  Fall Year \_\_\_\_\_

Total Fee Payable \_\_\_\_\_ Fee to be paid at the time of Registration \_\_\_\_\_

(50% of total fee is mandatory)

### Last Scholarship / Financial Aid Obtained:

Amount: \_\_\_\_\_ Agency:  CASE  Other \_\_\_\_\_

### Installment Plan (Rs. 1200/-one time installment fee will be added)

Undergraduate			Postgraduate		
Installment No	Due Date (DD/MM/YYYY)	Amount	Due Date (DD/MM/YYYY)	Cheque No	Amount
1					
2					
3					
Total Amount			Total Amount		

**PLEASE READ THE FOLLOWING AND SIGN:** I fully understand that if this Cheque is bounced back/dishonored then, I will be held responsible. In such a case, Institute has the right to take any action including but not limited to,

- a) A penalty of Rs. 1000/- for postgraduate students in case the cheque is bounced and Rs. 500 late fee for undergraduate students if installment is not paid by the given date may be charged.
- b) Cancellation of registration / admission.
- c) Grad/Post Grad Students must deposit Post dated cheques with this form.
- d) It is student's responsibility to ensure that sufficient funds are available in the bank account for which the post dated crossed Cheque (s) has been submitted **CASE would not be issuing any reminders..**

Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### For Office Use Only

Installment Granted  Not Granted  Recommended to (If initial amount is less than 50%)

Registrar CASE \_\_\_\_\_

Manager S. A.

Dean Academics \_\_\_\_\_

### Installment Fee Form (Student Receipt)

Name: \_\_\_\_\_

Roll No \_\_\_\_\_

(1) Due Date-----Amount (2) Due Date-----Amount-----

(3) Due Date-----Amount ----- Signature S. A Deptt-----