

 **INDIAN INSTITUTE OF PETROLEUM AND ENERGY**

**2ND Floor, Main Building, AU College of Engineering**

**Visakhapatnam – 530003**

 **Tele: 2585152, Website : www.iipe.ac.in, Email : office@iipe.ac.in**

**ACADEMIC OFFICE**

# **UNDERTAKING FOR APPLYING FEE WAIVER AS PER NORMS**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, (Full name in block letters)

Roll No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, of Semester \_\_\_\_\_\_\_\_\_\_\_, Department \_\_\_\_\_\_\_\_\_\_\_\_

declare that the certificate/ documents submitted to the office of Indian Institute of Petroleum & Energy, Visakhapatnam, in support of my fee waiver claim is genuine to the best of my knowledge, and in any case, if it is found to be fake/ not genuine, I will be held responsible for the same and any consequent action taken thereof. I am also bound to pay the full tuition fee with a penal interest in the case of my claim found to be false, or rejected by the committee for any suitable reason.

In case of fee waiver claim in the low-income category, we agree that in our family- both the parents / only father / only mother - of the student are/ is the earning member and the total family income of the last financial year is presented in our documents.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of the Student

Father's Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Income : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of Income : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Annual Income : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Source of Income : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

------------------------------------------------------------------------------------------------------------

As per the norms of Government of India for protecting the interests of the socially and economically backward students:

1. The SC/ST/PH students shall get complete tuition fee waiver.
2. The most economically backward students (whose family income is less than Rs. I Lakh per annum) shall get full remission of the tuition fee.
3. The other economically backward students (whose family income is between Rs. I Lakh to Rs. 5 Lakh per annum) shall get remission of 2/3 rd of the tuition fee.

Note: Criterion for the Application of Fee Waiver:

1. Candidates belonging to SC/ST categories should submit the certificates in original, signed by competent government officer, in support of their claim.
2. Candidates who are Physically challenged should submit medical certificate signed by competent government medical officer. The name, address and registration number of the doctor/officer is to be clearly mentioned on the document.
3. Candidates with low-income group should submit the Original Income certificate signed by competent government authority for the relevant financial year.
4. Candidates who are not in possession with Low income certificate, may submit the verified IT Return certificate/ acknowledgement along with the concerned IT process/ refund confirmation document (Income tax Intimation under sec. 143(1) of Income Tax Act, 1961) in support of the Low income category.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of the Student

Father’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_