

Io:	Date:	
Office of Admission		
President University		
Subject: Guarantee I	<u>Letter</u>	
Sir,		
l,	(Parent) of	(name of the student)
having registration no	studying in	(name of programme)
in thet	term, state that my ward would not be able to submit Rp	
for the next term by th	ne due date, as prescribed by the University because of	
Therefore, on his/her	behalf, I would like to request for an extension in the payme _(date).	nt of fee by
_	ctension in the payment of fee (if approved) is a special geston paid before the expiry of the extension date.	ure given by President
	ledge that in case of non-payment of payment within the ex itted to join class of 2018/2019. President University can tal tions and policies.	
Regards,		
Parent's Signature		
_ Name		
Relationship with the	student :	
Contact Numbers:		
Phone :_		
Email Id. (if any): _		