



மனோன்மணியம் சுந்தரனார் பல்கலைக்கழகம்

MANONMANIAM SUNDARANAR UNIVERSITY

Reaccredited with 'A+' Grade by NAAC



Dr. U. Balasubramanian ,  
Controller of Examinations.

University Buildings  
Abishekapatti  
Tirunelveli – 627 012

Ref: MSU/Co-ord./Excess fee-Refund/Nov-25

Date: 16.12.2025

To

The Principals of all Affiliated Colleges  
The Heads of University Departments

Sir/Madam,

**Sub:** November 2025 Examinations - Refund of excess fee remitted - Intimation – reg

**Ref:** Vice-Chancellor's order, dt.16.12.2025.

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I am, by direction to inform that the University is proposed to refund the excess fee remitted by the students in the online portal during **November 2025 Examinations**. In this regard, a '**Refund Form**' is attached herewith and also available in the University Website ([www.msuniv.ac.in/examinations/certificate/forms](http://www.msuniv.ac.in/examinations/certificate/forms)) for applying refund. The students may be directed to submit the individual claim to the office of the Controller of Examinations on or before **31.12.2025** by adhering the following terms and conditions:

1. Individual requests along with prescribed filled-in format duly forwarded by the Principal of Affiliated colleges / Heads of the University Departments only be considered for refund.
2. Incomplete 'Refund form' will be summarily rejected.
3. The requisitions should reach the office of the Controller of Examinations on or before **31.12.2025**.
4. If the requisitions are received after the last date, they will not be considered under any circumstances.
5. The amount will be credited only into the individual candidate's Bank Account as per the bank details submitted by the candidates.

The above may kindly be brought to the notice of the students concerned and also to be displayed in your college Notice Board.

**CONTROLLER OF EXAMINATIONS**

Encl: As above

1586  
18/12/25

Exam section  
18-12-25





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MANONMANIAM SUNDARANAR UNIVERSITY

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Abishekapatti, Tirunelveli - 627 012.

**Refund Form for Examination Excess Payment  
For November 2025 Examination only**

College Code	Course	Major	Reg. No.

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

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

Year of Examination : \_\_\_\_\_

**Payment Details:**

**A) Transaction Details:**

Sl.No.	Payment ID	Transaction ID	Amount Paid
1.			
2.			
3.			

**B) Amount Paid Details:**

Amount to be paid	Amount Actually Paid	Amount of Excess Paid to be refunded

**C) Excess payment to be credited into**

Bank Name & Branch	IFSC Code	Account No.
1.		
2.		

Mobile No: \_\_\_\_\_

Email- ID : \_\_\_\_\_

Office Seal & Date:

Signature of the Candidate

Office Use Only

Signature of the Principal