

Form No. II (Refund Form)

Note: All Fields are mandatory to be filled without which refund request will not be processed

To,

Date:

The Refund Coordinator,

ECPS Pvt. Ltd, Bangalore-51

From,

1. Name.....
2. Age
4. Father's/Husband's Name.....
5. Postal Address:
6. Mobile:.....email.....
7. Is there any Gap in Career: Yes No
8. Is there any Gap in Education/Academics: Yes No

	Year Of Passing	Percentage/ CGPA
10th		
12 th /Diploma		
Graduation		
Post Graduation		

9. Amount Paid: Rs. Receipt No/Transaction ID.....
10. At the time of enrollment with ECPS Pvt.Ltd. I was working with
.....Company
11. Current Employer:.....
12. Current Domain:.....
13. Work Experience:Years Months
14. Current Designation.....

Applicant's Signature

Refund Coordinator

15. A. Date of Registration.....

(Filled application sent date, not the date of payment made)

B. Date Of Expiry of validity period (3 or 6 calendar months As per clause no. 4 of terms and conditions).....

16. No. Of Interviews Scheduled.....

17. No. of interviews attended.....

18. No. Of interviews Not attended.....

19. No. of companies to which candidate is introduced.....

20. Names of the Companies Where interviews Attended

Sr. No	Name of the Company	Results (Rejected/ Selected)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

21. Names of the Companies Where interviews Not Attended

Sr. No	Name of the Company	Reason For Not Attending
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

22. Names of companies to which you were introduced

Sr. No	Name of the Company	Any communication received from the company/employer
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

(Use supplementary paper in case the no. of companies exceeds in para 17, 18, and 19)

23. Are you eligible for refund? : Yes No

24. If Yes, then explain, Why?

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25. Bank Account Details of the Applicant

Name of the Account Holder	
Name of the Bank	
Branch	
A/c Number	
IFSC Code	

Important:

1. Please Email this form to refund@exaltconsulting.com
2. Submitting refund request doesn't imply or guarantee refund approval. Concern staff will contact you within one week to confirm the receipt of the refund application.
3. Refund application will be reviewed as per the clause no 11.2 of the terms and conditions.
4. Submission of scanned/xerox copy of the payment receipt is mandatory, failing which further proceedings shall be kept on hold.

Declaration: I herein declare that:

- (i) the information furnished hereinabove is true and correct; and
- (ii) I have not concealed or misrepresented any fact stated hereinabove and the documents submitted herewith.