



OFFICE OF THE REGISTRAR
SATAVAHANA UNIVERSITY

KARIMNAGAR - 505 001 (T.S.), INDIA

Email: registrar@satavahana.ac.in, website: www.satavahana.ac.in

Prof. J. RAVI KUMAR

REGISTRAR

Lr.No. SU/KNR/Academic/2025-26/755

Date: 09.10.2025.

To
All the Principals of Affiliated Colleges
Offering Under-Graduate (NP) Courses
Satavahana University

Sir/ Madam,

Sub: Satavahana University, Karimnagar – UG Courses – I,III,V Semesters – 2025-26 –
Submission of nominal rolls by Affiliated Colleges – Payment of various fee payable
to the University – Reg.

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You are informed to remit the following fee prescribed remitted annually to the University
for the Academic year 2025-26 along with the Examination Nominal Rolls.

FEE COLLECTED FROM THE STUDENTS AT THE TIME OF ADMISSIONS AND PAYABLE TO THE UNIVERSITY FOR THE ACADEMIC YEAR 2025-26		
S.No.	Item	Fee
1	Inter-University Tournament Fee (per annum) (at the beginning of every academic year i.e., I, III, V semesters)	Rs. 80/- per student

The nominal rolls of the students of your college for Annual Examination, 2025-26 will be
accepted by the Examination Branch, only after getting **No Dues Certificate** from the **Secretary,
Sports Board**, Satavahana University, Karimnagar respectively.

As such, you are requested to arrange to remit the various fee as stated above through
online mode only. The amount has to be transferred to the following Accounts and submitted at the
undersigned, along with the copy of the letter of group wise ceiling and admitted strength.

Items	Account Details (NEFT/ RTGS only)	
S.No.5	Account Name:	Registrar Sports Board Account, SU, KNR
	Bank Name:	Union Bank, Vavilalapally Branch, Karimnagar
	Account Number:	610002010008376
	IFSC CODE:	UBIN0815837
	Submitted to O/o. Secretary, Sports Board, Satavahana University	

Please co-operate with the University by remitting the payments to the University on time
and avoid inconvenience to the students appearing for various University Examinations.

XGone
9/10/25
REGISTRAR

Encl: PROFORMA – I (Income Account), PROFORMA – II (Sports Board Account)

Copy to:

1. The Dean, College Development Council, SU
2. The Director, Academic Audit Cell, SU
3. The Controller of Examinations, SU with a request to accept the Examination forms from the colleges to various University Examination on production of No Dues Certificate.
4. The Assistant Registrar, SU,
5. The Secretary to Vice-Chancellor, SU
6. The In charge, SU website, SU
7. The SF

PROFORMA – II SPORTS BOARD

**(2 COPIES SHOULD BE SUBMITTED ALONG WITH COVERING LETTER TO
O/O. SECRETARY, SPORTS BOARD, SATAVAHANA UNIVERSITY)**

AFFIX/PASTE – RECEIPT

**(IF PLACE IS NOT SUFFICIENT
ATTACH ALONG WITH
PROFORMA)**

Name of the College along with Code:

Mode of payment: **only NEFT/RTEGS**

Sender Bank Account Details (sender-college):

Date of Payment:

Transaction ID:

(Receiver-University)

Receiver Account Name:

Receiver Account Number:

Receiver Bank details:

Fee (Amount) paid and Semester

Purpose of the Fee:

Type of fee	Fee	No. of Students	Amount Paid
Inter- University Tournament Fee	80/-		

DATE:

SIGNATURE OF THE PRINCIPAL ALONG WITH COLLEGE SEAL