

**National Institute for the Empowerment of Persons with
Visual Disabilities (Divyangjan), Dehradun
116 Rajpur, Road, Dehradun-248 001**

FEE REFUND APPLICATION FORM

(To be filled and submitted by the applicant)

To,

The Director,
NIEPVD, 116, Rajpur Road, Dehradun,
Uttarakhand

Subject : Refund of Fee in respect of dated

Sir/Madam,

I, _____, S/D/o _____, had applied for the post of _____, under
Category: GEN/OBC/SC/ST/PwD, as per your Advertisement No. _____ dated _____.
I have been informed that the recruitment examination has been cancelled due to administrative reasons.

I request you to kindly refund the application fee submitted by me. The transaction and bank details are as follows:

Application Details:

- **Post Applied For:**
- **Advertisement Number and Date:**
- **Name of Applicant:**
- **Father's/Mother's Name:**
- **Category (GEN/OBC/SC/ST/PWD):**

Payment Details:

- **Transaction ID:**
- **Amount Paid:**
- **Date of Payment:**
- **Bank Name (From which payment made):**

Bank Account Details for Refund:

Particulars	Details
Account Holder Name
Account Type (Savings/Current)
Account Number
Bank Name
Branch Name & Address

Particulars	Details
IFSC Code
MICR Code

I hereby declare that the information provided above is true and correct to the best of my knowledge. I understand that in case of any discrepancy, the refund may be withheld or delayed.

Signature of the Applicant: _____

Date: _____

Place: _____

For any queries, please contact: **0135-2748147/sectionofficer563@gmail.com**