

**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. 5-2/2026-0043 dated dated
18th Aug 2026. 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: _____

Instructions:

1. The filled-in refund form must be submitted by 30th Sept 2026, via **email/post**.
2. Incomplete forms or incorrect bank details may lead to delay/non-processing of refund.

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