

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2019-2020

Quarter : 1

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/04/2019 -- 30/06/2019)						
	Opening Balance as on beginning of Quarter 1	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	10	14	0	0	24
First Appeals	0	N/A	5	N/A	0	1

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
190	68	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)


23/07/2019 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit
report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2019-2020

Quarter : 2

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/07/2019 -- 30/09/2019)						
	Opening Balance as on beginning of Quarter 2	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	26	6	20	5	0	26
First Appeals	4	N/A	3	N/A	0	3
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
230	170	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)


22/10/2019 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit
report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2019-2020

Quarter : 3

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/10/2019 -- 31/12/2019)						
	Opening Balance as on beginning of Quarter 3	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	21	4	23	0	0	27
First Appeals	4	N/A	5	N/A	1	4
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
210	61	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

**No. of times various provisions were invoked while rejecting requests
Relevant Sections of RTI Act 2005**

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	http://niepmd.tn.nic.in

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)


17/01/2020 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2019-2020

Quarter : 4

Mode : EDIT

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/01/2020 -- 31/03/2020)						
	Opening Balance as on beginning of Quarter 4	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	21	1	5	1	0	4
First Appeals	4	N/A	2	N/A	0	3

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
50	22	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests
Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	http://niepmd.tn.nic.in

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2020-2021

Quarter : 1

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/04/2020 -- 30/06/2020)						
	Opening Balance as on beginning of Quarter 1	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	2	3	0	0	5
First Appeals	0	N/A	0	N/A	0	0

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
10	0	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	http://niepmd.tn.nic.in

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)

23/07/2020 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit
report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2020-2021

Quarter : 2

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/07/2020 -- 30/09/2020)						
	Opening Balance as on beginning of Quarter 2	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	33	6	7	0	25
First Appeals	0	N/A	0	N/A	0	0

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
70	12	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2020-2021

Quarter : 3

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/10/2020 -- 31/12/2020)						
	Opening Balance as on beginning of Quarter 3	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	7	8	11	0	0	26
First Appeals	0	N/A	2	N/A	0	2

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
130	12	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	http://niepmd.tn.nic.in

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)


11/01/2021 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit
report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2020-2021

Quarter : 4

Mode : EDIT

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/01/2021 -- 31/03/2021)						
	Opening Balance as on beginning of Quarter 4	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	2	8	1	0	9
First Appeals	0	N/A	1	N/A	0	0
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
80	178	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

**No. of times various provisions were invoked while rejecting requests
Relevant Sections of RTI Act 2005**

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>

7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>

If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)


*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1) (b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	http://niepmd.tn.nic.in

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b)


07/04/2021 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?

**If Answer of (C) is yes -
Provide the detail/ URL of webpage, where the Audit
report is posted (max 150 chars)**

Select ▼	<input type="text"/>
----------	----------------------

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy)

17/06/2021 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2021-2022

Quarter : 1

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/04/2021 -- 30/06/2021)						
	Opening Balance as on beginning of Quarter 1	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	1	19	1	0	14
First Appeals	1	N/A	4	N/A	0	4

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
190	8	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	<input type="text" value="A. Amarnath"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	<input type="text" value="Lecturer"/>
Contact Number	<input type="text" value="044-27472113"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	<input type="text" value="niepmd@gmail.com"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2021-2022

Quarter : 2

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/07/2021 -- 30/09/2021)						
	Opening Balance as on beginning of Quarter 2	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	23	3	14	1	0	17
First Appeals	3	N/A	2	N/A	0	2

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
130	20	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2021-2022

Quarter : 3

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/10/2021 -- 31/12/2021)						
	Opening Balance as on beginning of Quarter 3	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	37	7	10	1	0	18
First Appeals	5	N/A	0	N/A	0	0

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Adtl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
90	4	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	<input type="text" value="A. Amarnath"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	<input type="text" value="Lecturer"/>
Contact Number	<input type="text" value="044-27472113"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	<input type="text" value="niepmd@gmail.com"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2021-2022

Quarter : 4

Mode : EDIT

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/01/2022 -- 31/03/2022)						
	Opening Balance as on beginning of Quarter 4	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	35	6	16	4	0	17
First Appeals	5	N/A	1	N/A	0	1

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Adtl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
150	4	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	<input type="text" value="A. Amarnath"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	<input type="text" value="Lecturer"/>
Contact Number	<input type="text" value="044-27472113"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	<input type="text" value="niepmd@gmail.com"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) [Back](#)

Year: 2022-2023

Quarter : 1

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/04/2022 -- 30/06/2022)						
	Opening Balance as on beginning of Quarter 1	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	16	6	10	5	0	11
First Appeals	0	N/A	0	N/A	0	0
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
90	32	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2022-2023

Quarter : 2

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/07/2022 -- 30/09/2022)

	Opening Balance as on beginning of Quarter 2	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	16	10	13	4	0	0
First Appeals	0	N/A	3	N/A	0	0

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Adtl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
100	312	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Back

Year: 2022-2023

Quarter : 3

Mode : VIEW

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/10/2022 -- 31/12/2022)

	Opening Balance as on beginning of Quarter 3	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	35	8	25	2	0	35
First Appeals	3	N/A	4	N/A	0	3

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Adtl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
240	64	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests

Relevant Sections of RTI Act 2005

Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD) Back

Year: 2022-2023

Quarter : 4

Mode : EDIT

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/01/2023 -- 31/03/2023)						
	Opening Balance as on beginning of Quarter 4	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	78	6	34	12	0	25
First Appeals	7	N/A	4	N/A	0	11

Total no. of CAPIOs designated	Total no. of CPIOs designated	Total no. of AAs designated
0	1	1

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Adtl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
210	82	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>

8	<input type="text"/>	Select ▼	<input type="text"/>
9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	<input type="text" value="A. Amarnath"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	<input type="text" value="Lecturer"/>
Contact Number	<input type="text" value="044-27472113"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	<input type="text" value="niepmd@gmail.com"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

RTI Request & Appeal Management Information System(RTI-MIS)

[HOME](#) [SEARCH](#) [ASSESSMENT](#) [MASTER UPDATION](#) [ANNUAL RETURN](#) [UTILITIES](#) [REPORT](#) [LOGIN HISTORY](#)
[LOGOUT](#)

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : **National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)** Back

Year: 2023-2024

Quarter : 1

Mode : **VIEW**

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/04/2023 -- 30/06/2023)						
	Opening Balance as on beginning of Quarter 1	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	0	10	11	2	0	13
First Appeals	0	N/A	2	N/A	0	2
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
120	30	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>

9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath <input type="text"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer <input type="text"/>
Contact Number	044-27472113 <input type="text"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com <input type="text"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

RTI Request & Appeal Management Information System(RTI-MIS)

[HOME](#) [SEARCH](#) [ASSESSMENT](#) [MASTER UPDATION](#) [ANNUAL RETURN](#) [UTILITIES](#) [REPORT](#) [LOGIN HISTORY](#)
[LOGOUT](#)

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : **National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)** Back

Year: 2023-2024

Quarter : 2

Mode : **VIEW**

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

***Block I (Details about the requests and appeals)**

Progress during Quarter (01/07/2023 -- 30/09/2023)						
	Opening Balance as on beginning of Quarter 2	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	6	37	20	22	0	30
First Appeals	0	N/A	2	N/A	0	1
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

***Block II (Details about fees collected, penalty imposed and disciplinary action taken)**

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
230	40	0	0

***Block III (Details of various provisions of section 8 while rejecting the requested information)**

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>

9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer
Contact Number	044-27472113 (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

Submit

RTI Request & Appeal Management Information System(RTI-MIS)

[HOME](#) [SEARCH](#) [ASSESSMENT](#) [MASTER UPDATION](#) [ANNUAL RETURN](#) [UTILITIES](#) [REPORT](#) [LOGIN HISTORY](#)
[LOGOUT](#)

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : **National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)** Back

Year: 2023-2024

Quarter : 3

Mode : **VIEW**

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

*Block I (Details about the requests and appeals)

Progress during Quarter (01/10/2023 -- 31/12/2023)						
	Opening Balance as on beginning of Quarter 3	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	11	27	73	19	0	54
First Appeals	1	N/A	3	N/A	0	3
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

*Block II (Details about fees collected, penalty imposed and disciplinary action taken)

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
540	108	0	0

*Block III (Details of various provisions of section 8 while rejecting the requested information)

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>

9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath <input type="text"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer <input type="text"/>
Contact Number	044-27472113 <input type="text"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com <input type="text"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 

RTI Request & Appeal Management Information System(RTI-MIS)

[HOME](#) [SEARCH](#) [ASSESSMENT](#) [MASTER UPDATION](#) [ANNUAL RETURN](#) [UTILITIES](#) [REPORT](#) [LOGIN HISTORY](#)
[LOGOUT](#)

Public Authority: National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)

Role : Nodal Officer

User : M. Rajesh

Quarterly Return Form

Public Authority : **National Institute for Empowerment of Persons with Multiple Disabilities (NIEPMD)** Back

Year: 2023-2024

Quarter : 4

Mode : **EDIT**

* Blocks are mandatory

* Registration Fee collected against the no of request is not necessarily equivalent to the total fee collected.

*Block I (Details about the requests and appeals)

Progress during Quarter (01/01/2024 -- 31/03/2024)						
	Opening Balance as on beginning of Quarter 4	No.of applications recieved as transfer from other PAs u/s 6(3)	Recieved during the Quarter (including cases transferred to other PAs)	No. of cases transferred to other PAs u/s 6(3)	Decisions where request/appeals rejected	Decisions where request/appeals accepted (Request dispose of and request return to applicant)
Requests	38	45	60	15	0	105
First Appeals	1	N/A	6	N/A	0	6
Total no. of CAPIOs designated		Total no. of CPIOs designated		Total no. of AAs designated		
0		1		1		

*Block II (Details about fees collected, penalty imposed and disciplinary action taken)

Registration Fee Collected(in Rs.)u/s 7(1)	Addl. Fee Collected(in Rs.) u/s 7(3)	Penalty Amount Recovered (in Rs.) as directed by CIC u/s 20(1)	No. of cases where disciplinary action taken against any officer u/s 20(2)
510	156	0	0

*Block III (Details of various provisions of section 8 while rejecting the requested information)

No. of times various provisions were invoked while rejecting requests													
Relevant Sections of RTI Act 2005													
Section 8 (1)										Sections			
a	b	c	d	e	f	g	h	i	j	9	11	24	other
0	0	0	0	0	0	0	0	0	0	0	0	0	0

Block IV (Details regarding compliance of direction/recommendation of the Commission)

S.No.	Reference No. of cases wherein Commission made specific recommendation as per section 25(5) (max. 20 chars)	Whether action is initiated to comply with recommendation of Commission.	Details, thereof (max. 250 chars)
1	<input type="text"/>	Select ▼	<input type="text"/>
2	<input type="text"/>	Select ▼	<input type="text"/>
3	<input type="text"/>	Select ▼	<input type="text"/>
4	<input type="text"/>	Select ▼	<input type="text"/>
5	<input type="text"/>	Select ▼	<input type="text"/>
6	<input type="text"/>	Select ▼	<input type="text"/>
7	<input type="text"/>	Select ▼	<input type="text"/>
8	<input type="text"/>	Select ▼	<input type="text"/>

9	<input type="text"/>	Select ▼	<input type="text"/>
10	<input type="text"/>	Select ▼	<input type="text"/>


If the Public Authority made any changes in regard to its rules/regulations/procedures as a result of requested information by the citizens, please provide the summarized details of the changes (max. 500 chars)

*** Block V (Details regarding Mandatory Disclosures and Transparency Officer)**

A. Is the Mandatory Disclosure under Sec. 4(1)(b) posted on the website of Public Authority ?	If Answer of (A) is No - Is there any other medium of dissemination? Provide details below (not exceeding 500 chars)	If Answer of (A) is yes - Provide the detail/ URL of webpage, where the disclosure is posted
Yes ▼	<input type="text"/>	<input type="text" value="http://niepmd.tn.nic.in"/>

*** Name of Transparency Officer, if any, in the Public Authority along with the designation, telephone number & e-mail ID ,**

Whether Transparency Officer Appointed	Yes ▼
Name of Transparency Officer	A. Amarnath <input type="text"/> (Please do not add Shri/Smt./Mr./Ms. before the name)
Gender	Male ▼
Designation	Lecturer <input type="text"/>
Contact Number	044-27472113 <input type="text"/> (Enter Landline Numbers as STD Code-Phone Number e.g. 011-23346789)
Email Address	niepmd@gmail.com <input type="text"/>

B. Last Date of updating of Mandatory disclosure under Section 4(1)(b) 

C. Has the Mandatory Disclosure been audited by third party as per DOPT vide OM No. 1/6/2011-IR dated 15.04.2013 ?	If Answer of (C) is yes - Provide the detail/ URL of webpage, where the Audit report is posted (max 150 chars)
Select ▼	<input type="text"/>

Date of audit of Mandatory disclosure under Section 4(1)(b) (Format dd/mm/yyyy) 