GOVERNMENT OF ODISHA
DIRECTORATE FOR WELFARE OF PERSONS WITH DISABILITIES
SIDR BUILDING, CAPITAL HOSPITAL CAMPUS, UNIT-VI,
BHUBANESWAR- 751 001.
E Mail: dwpwdodisha@hotmail.com

No. DPWD/III/70/2013 Dated 10.4.13

From
Sri Bibhuti Bhushan Pattnaik, OAS (S)
Director for welfare of the
Persons with Disabilities,
Bhubaneswar.

To
The Secretary
Association for Social Work and Social Research in Orissa
At-Seva Vihar,
Po- Butupali,
Dist-Boudh


Sir,

In continuation with your application for renewal of registration of your organization
under the provisions of PWD Act 1995 I am to inform you that your application for renewal of
registration is granted. The certificate of renewal of registration is enclosed.

Yours faithfully,

Welfare of PwDs
Odisha, Bhubaneswar

Encl: As above.

Memo No. ............./ DWPD Dated .............

Copy forwarded to the DSWO Boudh for information and necessary action.
Certificate of Renewal
[Under Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act. 1995]
(ACT No.-1 of 1996 ASSENTED BY GOVT. OF INDIA)

GOVERNMENT OF ODISHA
DIRECTORATE FOR WELFARE OF PERSONS WITH DISABILITIES

WOMEN & CHILD DEVELOPMENT DEPARTMENT

Ref. Regd.NO.......10............../DWPD OF ..... BBSR Dtd. 30.06.2004

The above referred Registration of ASSOCIATION FOR SOCIAL WORK AND SOCIAL RESEARCH IN ORISSA

At-......SEVA VIHAR... Po.-......BUTUPALI ...... Dist............BOUDH

issued under the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 and rules thereunder is here by renewed for the period from............11.06.2010 to............10.06.2013

Given under my hand at Bhubaneswar this .............10th................ Day of APRIL............... Two thousand and............2013

[Signature]
Director
Welfare of PwDs
Odisha, Bhubaneswar