CERTIFICATE FOR PHYSICALLY HANDICAPPED OF U.P.

NAME & ADDRESS OF THE INSTITUTE/HOSPITAL

Certificate No. 01 date - 12-07-2012

Date - 27/06/2022

DISABILITY CERTIFICATE

This is certified that Shri/Smt/Kum. SACHIN YADAV
son/wife/daughter of Shri. KAMVEER SINGH YADAV
sex MALE identification mark (S)..... age 27
is suffering from permanent disability of following category:

A. Locomotor or cerebral palsy:
- (I) BL-Both legs affected but not arms.
- (II) BA-Both arms affected
  - (a) Impaired reach
  - (b) Weakness of grip
- (III) BLA-Both legs and both arms affected
- (Iv) OL-One leg affected (right or left)
  - (a) Impaired reach
  - (b) Weakness of grip
  - (c) Ataxic
- (v) OA-One arm affected
  - (a) Impaired reach
  - (b) Weakness of grip
  - (c) Ataxic
- (vi) BH-Stiff back and hips (Cannot sit or stoop)
- (vii) MW-Muscular weakness and limited physical endurance.

B. Blindness or Low Vision:
- (I) B-Blind
- (II) PB-Partialy Blind

C. Hearing Impairment:
- (i) D-Deaf
- (ii) PD-Partialy Deaf

(Delete the category whichever is not applicable)

2. This condition is progressive/non-progressive/likely to improve/not likely to improve. Re-assesan of this case is not recommended/is recommended after a period of ..... year ..... months.
3. Percentage of disability in his/her case is 40 percent.
4. Sh./Smt./Kum. SACHIN YADAV ..... meets the following physical requirements discharge of his/her duties:

(I) F-can perform work by manipulating with figers.	Yes/No
(ii) PP-can perform work by pulling and pushing.	Yes/No
(iii) L-can perform work by lifting.	Yes/No
(Iv) KC-can perform work by kneeling and crouching	Yes/No
(v) B-can perform work by bending.	Yes/No
(vi) S-can perform work by sitting.	Yes/No
(vii) ST-can perform work by standing.	Yes/No
(viii) W-can perform work by walking	Yes/No
(ix) SE-can perform work by seeing.	Yes/No
(x) H-can perform work by hearing/speaking	Yes/No
(xi) RW-can perform work by reading and writing	Yes/No

(Dr. .....)
Member
Medical Board

(Dr. .....)
Member
Medical Board

डा० नितीश यादव
नेत्र सर्जन
रजि० नं० - 51442
सामु० स्वा० केन्द्र, भोगांव (मैनपुरी)

Deepika.
Dr. DEEPIKA VAJPAYEE
Dr. DEEPIKA VAJPAYEE
ENT Surgeon
Dist. Hospital, Mainpuri
Reg. No.- 91411

Countersigned by the Medical Superintendent/ CMO/HQ Hospital (with seal)

मुख्य चिकित्सा अधिकारी
मैनपुरी (उ०प्र०)