



Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India

Disability Certificate

Issuing Medical Authority, Amreli, Gujarat



Certificate No.: GJ1320620100131739

Date: 24/06/2022

This is to certify that I/we have carefully examined Kum. **Apeksha Hareshbhal Makavana**, Daughter of Shri **Hareshbhal**, Date of Birth **09/06/2010**, Age **12**, Female, Registration No. **2413/00000/2206/2090449**, resident of House No. **Khicha - 365640**, Sub District **Dharl**, District **Amrell**, State / UT **Gujarat**, whose photograph is affixed above, and I am/we are satisfied that:

(A) She is a case of **Locomotor Disability**

(B) The diagnosis in her case is **RIGHT IPPER LIMB MORPLEGIA**

(C) She has **85%**(in figure) **Eighty Five** percent(in-words) Permanent Disability in relation to her as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPWD Act, 2016 notified by Government of India vide S.O. 76(E) dated 04/01/2018).

The applicant has submitted the following document(s) as proof of residence:

Nature of Document(s): Aadhaar card

Signature / Thumb Impression of the Person with Disability

DR. NADESH CHAUDHARY

M.S. Dhanopadi G-30569

Signature of notified Medical Authority Member(s)

SHAN COLLEGE
& 'G' AMRELI



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DRS
Issuing Medical Authority, Amreli, Gujarat
Chief District Medical Officer
Cum Civil Surgeon
General Hospital, Amreli

This Card/Certificate is meant to certify the disability of the person and is not an instrument for ID/Address Proof for any purpose.