



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

## Disability Certificate

Shri Bhausaheb Hire Government Medical College, Dhule, Dhule, Maharashtra



Certificate No.: MH4760319910010840

Date: 20/07/2024

This is to certify that I/We have carefully examined Miss **Ashvini Ravindra Gavande** Daughter of Shri **Raju**, Date of Birth **12/10/1991**, Female, Registration No. **2747/40000/0240/60008799**, resident of **Subhash Nagar Lane 1 Juna Dhule - 424001**, Sub District **Dhule**, District **Dhule**, State / UT **Maharashtra** Whose photograph is affixed above, and I/We satisfied that:

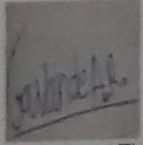
(A) She is a case of **Low Vision**

(B) The diagnosis in her case is **BE PALE DISC**

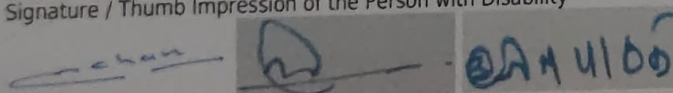
(C) She has **75%** (in figure) **seventy five** percent(in words) Permanent Disability in relation to her Both Eye as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPwD Act, 2016 notified by Government of India vide S.O. 1338 (E) Dated 12.03.2024).

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



Signature of notified Medical Authority Member

Shri Bhausaheb Hire Government Medical College, Dhule  
Dhule, Maharashtra

