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

Disability Certificate

Dmo Office Kottayam, Kottayam, Kerala

Certificate No.: KL1010420020037757 **Date: 04/03/2020**

This is to certify that I/We have carefully examined Shri **Muhammed Farooque** Son of Shri **P A Siyad**, Date of Birth **11/10/2002**, Male, Registration No. **3210/00000/1810/1100305**, resident of **Pandiyalackal Nadackal - 686121**, Sub District **Meenachil**, District **Kottayam**, State / UT **Kerala**
Whose photograph is affixed above, and I/We satisfied that:
(A) He is a case of **Hearing Impairment**
(B) The diagnosis in his case is **Conjenetial Bilateral Moderate Sensorineural Hearing loss.**
(C) He has **65%** (in figure) **Sixty Five** percent(in words) Permanent Disability in relation to his Ears 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

Signature of notified Medical Authority Member

Dmo Office Kottayam
Kottayam, Kerala

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