



Sri Dharmasthala Manjunatheshwara College
(Autonomous), Ujire-574 240, Dakshina Kannada, Karnataka State

2.1.2

Details of Divyangjan students 2022-23



Sri Dharmasthala Manjunatheshwara College
(Autonomous), Ujire-574 240, Dakshina Kannada, Karnataka State

Details of Divyangjan students 2022-23

Sl. No.	Name of the student	Gender/ Category	Class	Adm.No.	Roll No.	Remarks	Mentor
1	Manu M.	Male/SC	I B.Com.	70/2022-23	220716	Visually challenged	Ms. Pavithra Jain
2.	Gowrav	Male/3A	I BA Hist. Opt.Eng.	115/2022-23	220086	Visually challenged	Ms.Kousalyadevi Himani
3	Mahammad Sinan	Male/2B	I BA Psy. Opt. Eng.	132/2022-23	220145	Differentially abled	Dr.Vandana Jain



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(ಭಾವಚಿತ್ರವನ್ನು ವೈದ್ಯಕೀಯ ಪ್ರಾಧಿಕಾರದ ಸದಸ್ಯರು ದೃಢೀಕರಿಸತಕ್ಕದ್ದು)

(PHOTO TO BE ATTESTED BY THE MEDICAL AUTHORITY MEMBER)

Manu. M
200716
Blom
2022-23

6

Name and Address of the Medical Authority Issuing Disability Certificate Manu. M

(ಅಂಗವಿಕಲತೆಯ ಸ್ವರೂಪವನ್ನು ನಿರ್ಧರಿಸುವುದು ಸರ್ಕಾರದ ಆದೇಶ ಸಂಖ್ಯೆ ಮುಖ್ಯ/65/2011 ದಿನಾಂಕ:18-02-2011ರಂತೆ ಕೇವಲವರು ಪ್ರಮಾಣವನ್ನು ನಿರ್ಧರಿಸಿ ಸಮೂಹದ ದೃಢೀಕರಿಸುವುದು.

Differently abled persons % of disability has to be diagnosed, specified and certified as per the Govt. Order No.WCD/PHP/65/2011 Dated:18-02-2011

ಮೇಲ್ಕಂಡ ಭಾವಚಿತ್ರದ ವ್ಯಕ್ತಿಯ ಅಂಗವಿಕಲತೆಯ ಪ್ರಮಾಣವನ್ನು ಈ ಕೆಳಕಂಡಂತೆ ಹಾಗೂ/ಅಥವಾ ದೃಢೀಕರಿಸುವುದಾಗಿದೆ.

As per the above persons affixed Photograph, I am/ We are/Satisfied and Certified said persons as below.

Sl. No	Disability	Affected part of the body	Diagnosis	Permanent physical Impairment/ Mental Disability (in%)
1.	Locomotor Disability	@		
2.	Low Vision	#		
3.	Blindness	Both		
4.	Hearing Impairment	L		
5.	Mental Retardation	X		
6.	Mental Illness	X		
7.	Multiple Disabilities			

Please strike out (x) the Disabilities which are not applicable.

B.L. and. to Severe More Hearing loss.

A. He / She is a case of Disability. His/Her extent of permanent Physical Impairment/ Disability has been evaluated as per specified Guidelines for the disabilities ticked () above and shown against the relevant Disability in the above table.

B. 1. In the light of the above, His / Her overall permanent Physical Impairment as per the specified guidelines is as follows -

In figures 50% percent (%)

In words After Percent (%)

2. The condition is progressive / non progressive / likely to improve / not likely to improve

10. ಹಿರಿಯರ ಮಾರ್ಗದರ್ಶನ ಸೂಕ್ತ ಸಾಧನ ಸಂಕೇತಿಸಿ ವಿವರ

Recommended suitable Aids and Appliances

1.
2.
3.

11. ವಿಕಲತೆಯವರ ಸಹಿ/ಮುದ್ರೆ/ನಿರ್ದೇಶ : Manu. M

Signature : Thumb Impression of Differently abled persons

M. Manu. M
200716
Blom
2022-23



Sri Dharmasthala Manjunatheshwara College (Autonomous), Ujire-574 240, Dakshina Kannada, Karnataka State

12. ಪ್ರಯತ್ನ ಗುರುತಿಸ ಚಿಹ್ನೆ / Identification Mark

13. ವೈದ್ಯಕೀಯ ಪ್ರಾಧಿಕಾರದ ಸದಸ್ಯರ ಸಹಿ ಮತ್ತು ವರದಿಯ/ಮೂಲಕ/ಪ್ರಾಧಿಕಾರ/ಕರ್ತವ್ಯ ವೈದ್ಯಕೀಯ ಮಂಡಳಿಯ ನೋಂದಣಿ ಸಂ.

Signature of Medical Authority Members with Designation/Seal/ Medical Council of India/ Karnataka Registration No.

COUNTERSIGNED

(Chairman) Name and Seal with KMC Registration No.

(Concerned Specialist) Name and Seal with KMC Registration No.

(Physician) Name and Seal with KMC Registration No.

Psychiatrist
Wanlock District Hospital
Mangalore

(ಸರ್ಕಾರಿ ಆರೋಗ್ಯ ಸಂಸ್ಥೆ, ಮುಂಬಯಿ/2010 ದಿನಾಂಕ:21-09-2011ರ ಪ್ರಕಾರ (ಪ್ರಾಥಮಿಕ ಆರೋಗ್ಯ ಕೇಂದ್ರಗಳಲ್ಲಿ ಏಕ ಸದಸ್ಯ ವೈದ್ಯಕೀಯ ಪ್ರಾಧಿಕಾರವು ಈ ಮೇಲೆ ಸಮೂಹೀಕರಣ ಕ್ರ. ಸಂ. 1 ರನ್ವಯ ದೃಢೀಕರಿಸುವುದು ಮತ್ತು ಅದರ ಕ್ರ. ಸಂ. 2, 3ರನ್ನು ಕೈಬಿಡುವುದು.)

As per Govt. Order No. WCD/PH/65/2011 Dated: 21-09-2011 (In case of Medical Authority at Primary Health Centre only Single Member Authority is constituted/hence he has to certify at Sl.No. 1 and remaining Sl.No. 2 & 3 has to be ignored)



6

Name and Address of the Medical Authority Issuing Disability Certificate

(ಅಂಗವಿಕಲತೆಯ ಸ್ವರೂಪವನ್ನು/ವ್ಯಕ್ತಿಯನ್ನು ಸರ್ಕಾರದ ಆದೇಶ ಸಂಖ್ಯೆ ಮುಂಬಯಿ/65/2011 ದಿನಾಂಕ:21-09-2011ರಂತೆ ಕೇರಡವರು ಪ್ರಮಾಣವನ್ನು ನಿರ್ಧರಿಸಿ ಸಮೂಹದ ದೃಢೀಕರಿಸುವುದು. Differently abled persons % of disability has to be diagnosed, specified and certified as per the Govt. Order No.WCD/PH/65/2011 Dated:21-09-2011) ಮೇಲ್ಕಂಡ ಛಾಪಚಿತ್ರದ ವ್ಯಕ್ತಿಯ ಅಂಗವಿಕಲತೆಯ ಪ್ರಮಾಣವನ್ನು ಈ ಕೆಳಕಂಡಂತೆ ನಾವು/ನಾವು ದೃಢೀಕರಿಸುವುದು/ದೃಢೀಕರಿಸಿದ್ದೇವೆ.

As per the above persons affixed Photograph, I am/ We are/Satisfied and Certified said persons as below.

Sl. No.	Disability	Affected part of the body	Diagnosis	Permanent physical Impairment/ Mental Disability (in %)
1.	Locomotor Disability			
2.	Low Vision			
3.	Blindness	Both		
4.	Hearing Impairment	L		
5.	Mental Retardation	X		
6.	Mental Illness	X		
7.	Multiple Disabilities			

Please strike out (x) the Disabilities which are not applicable.

A. He / She is a case of Multiple Disability. His/Her extent of permanent Physical Impairment/ Disability has been evaluated as per specified Guidelines for the disabilities ticked () above and shown against the relevant Disability in the above table.

B. 1. In the light of the above, His / Her overall permanent Physical Impairment as per the specified guidelines is as follows -

In figures 75 percent (%)

In words Seventy five Percent (%)

2. The condition is progressive / non progressive / likely to improve / not likely to improve

10. ಶಿಕ್ಷಣಕ್ಕೆ ಮಾದಲಾರ ಸಹಕರಿಸುವ ಸಲಕರಣೆಗಳ ವಿವರ

Recommended suitable Aids and Appliances

1.

2.

3.

11. ವಿಶೇಷತೆಗಳ ಸಹಿ/ಪದ್ಧತಿ ಗುರುತಿಸ : Signature

Signature : Thumb Impression of Differently abled persons

I BA - Eng opt - Psychology

Ad-NO- 132 / 22-23

220145

23 (Muslim)



Sri Dharmasthala Manjunatheshwara College
(Autonomous), Ujire-574 240, Dakshina Kannada, Karnataka State

Reg No 33681 Date 08/10


GOVERNMENT OF KARNATAKA

982688

ಕ್ರ. ಸಂ. 982688
ಸಿ.ಎಂ. 982688

ಅಂಗವಿಕಲತೆಯ ವ್ಯವಸ್ಥಾಪನಾ ಮತ್ತು
ವಿಕಲಚೇತನರ ಸ್ವಾಯತ್ತತೆ
DISABILITY CERTIFICATE AND IDENTITY
CARD FOR DIFFERENTLY ABLED PERSONS

ವಿಶೇಷವಾಗಿ ಹಾಗೂ ಹಿರಿಯ ನಾಗರಿಕರ ಸುರಕ್ಷಣೆ
ವಿಭಾಗ, ಬೆಂಗಳೂರು
DIRECTORATE FOR THE EMPOWERMENT
OF DIFFERENTLY ABLED AND
SENIOR CITIZENS, BANGALORE

ಸಿ.ಎಂ. 982688, ಸಿ.ಎಂ. 982688, ಸಿ.ಎಂ. 982688, ಸಿ.ಎಂ. 982688

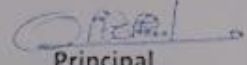

UNIQUE DISABILITY ID
Government of India

State ID: 10A

Authoriser No: 1234

Address of Card Issuing Authority
Tach General Hospital - 574214

ATTESTED


Principal
PRINCIPAL
S.D.M COLLEGE
UJIRE - 574240, D.K.

I BA
Gowdaru
08-10