

यत्र नार्यस्तु शिक्षयन्ते रमन्ते तत्र देवताः ।



M.L. & G.E. Society's

DR. (SOW.) I.B.P. MAHILA KALA MAHAVIDYALAYA, AURANGABAD

Estd. June 1970

Affiliated to Dr. Babasaheb Ambedkar Marathwada University, Aurangabad

NAAC Reaccredited "B" Grade

Website : www.ibpmahilacollege.org , E-mail ID : principalmahilacollege@yahoo.com

Phone No. : 0240-2331848

2.2.3: Percentage of differently abled students (Divyangjan) on rolls. (Current Year Data)

List of differently abled students.

2018-19	Ku Gargi Parvekar Ku. Meena Bharuka Ku Yamini Deshmukh Ku Aditi Tupkar	B.A F.Y B.A S.Y B.A T.Y B.A T.Y
----------------	---	--

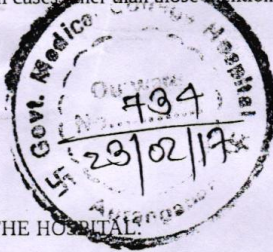
Scan Copies of Disability Certificates

Government of Maharashtra

Form-IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See rule 4)



NAME OF THE HOSPITAL

Govt. Medical College Hospital, Aurangabad
(Maharashtra, India)

Certificate Number: 381090

Date: 23/02/2017

This is to certify that I have carefully examined.

Person Identification Number: **PI51500526389**

Aadhar Number: N/A

Shri/Smt./Kum: **PARVEKAR GARGI YOGESH SUREKHA**Father Name: Shri/Smt./Kum. **YOGESH**

Date of Birth (dd/mm/yyyy):

Age: **16 years**Gender: **Female****Permanent Address:**House Address: **Garkheda**Village: **Aurangabad**Taluka: **Aurangabad**District: **Aurangabad**Pincode: **N/A**

whose photograph is affixed above, and am satisfied that he / she is a case of **Physical Impairment** disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

Disability	Affected part of Body	Diagnosis	Disability (in %)
Physical Impairment	Bil. L/L	Operated Meningomyelocele Papaparesis	72

1. The Above condition is **Permanent, non-progressive, not likely to improve**

2. Reassessment of disability

3. The applicant has submitted following documents as proof of residence: **Aadhar Card**4. The applicant has submitted following documents as proof of Identity: **Aadhar Card**

(Signature and Seal of Authorised Signatory of notified Medical Authority)

[Signature]
Dr Kiran Uttamrao Nandedkar
Assisntant Professor Medicine
Member

[Signature]
Dr Panpatte Nikhil Pradeeprao
R.M.O.
Member Secretary

[Signature]
Dr Sudhir Prabhakar Rao Choudhari
Medical Superintendent / President
President

Regn. No. : MMC-2009/05/2227

Regn. No. : MMC-2015/05/2427

Regn. No. : MMC-62710

Signature of the person whose favour disability certificate is issued
 Note: This is not a legal document. It is issued for medical purposes only.
 Assistant Professor, Department of Medicine, Govt. Medical College, Hospital Aurangabad
 ARMO, Govt. Medical College & Hospital Aurangabad
 Medical Superintendent, Govt. Medical College, Hospital Aurangabad.



भारत सरकार



आधार

भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India

नामांकन क्रम / Enrollment No 1207/82433/09058

To,
गार्गी योगेश पार्वेकर
Gargi Yogesh Parvekar
FLAT NO. 2 SWAPNAGARI
ABHISHEK APPT
GARKHEDA
Garkheda
Garkheda Aurangabad Aurangabad
Maharashtra 431009

Ref: 15494 / 211 / 926120 / 926203 / P



SH320769189FT



आपका आधार क्रमांक / Your Aadhaar No. :

7467 0056 1714

आधार - आम आदमी का अधिकार



भारत सरकार

Government of India



गार्गी योगेश पार्वेकर
Gargi Yogesh Parvekar
जन्म वर्ष / Year of Birth : 2000
महिला / Female



7467 0056 1714

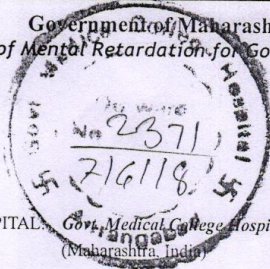
आधार - आम आदमी का अधिकार

Government of Maharashtra English

Software for Assessment of Disability, Maharashtra (SADM)

Social Justice and Special Assistance Department, Public Health Department, Directorate of Medical Education and Research

Government of Maharashtra
Certificate of Mental Retardation for Government Benefits



Assistant Professor,
Dept. Of Psychiatry,
Govt. Medical College, Aurangabad

NAME OF THE HOSPITAL: **Govt. Medical College Hospital, Aurangabad**
 (Maharashtra, India)

Certificate Number: 537156

Date: 07/06/2018

This is to certify that I have carefully examined.
 Person Identification Number: **MR51500735717**
 Aadhar Number: N/A
 Shri/Smt./Kum: **BHARUKA MINA JUGALKISHOR SUSHILA**
 Mother Name: Shri/Smt./Kum. **SUSHILA**
 Date of Birth (dd/mm/yyyy): **10/06/1984**
 Gender: **Female**

Age: **34 years**

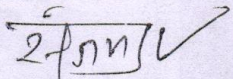
Permanent Address:

House Address: **SHRIMANT GALLI**
 Village: **Aurangabad** Taluka: **Aurangabad**
 District: **Aurangabad** Pincode: **431001**

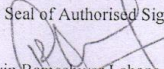
whose photograph is affixed above, and am satisfied that he / she is a case of **Mental Retardation** disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

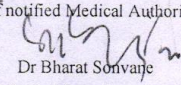
Disability	Categorisation of Mental Retardation	Diagnosis	Disability (in %)
	Mental Retardation Mild		MENTAL RETARDATION 50

- The Above condition is **Permanent, non-progressive, not likely to improve**
- Reassessment of disability
- The applicant has submitted following documents as proof of residence:
Aadhar Card
- The applicant has submitted following documents as proof of Identity:
Aadhar Card


 Dr. Sanjay Devidasrao Ghuge
 Assistant Professor Psychiatry
 Member
 Regn. No. : 2009/02/0382

(Signature and Seal of Authorised Signatory of notified Medical Authority)


 Dr. Pravin Rameshwar Lahane
 R.M.O
 Member Secretary
 Regn. No. : MMC-2017/11/5337


 Dr. Bharat Sonwarje
 Medical Superintendent
 President
 Regn. No. : MMC -74366

Assistant Professor,
Dept. Of Psychiatry,
Govt. Medical College, Aurangabad

Medical Superintendent,
Govt. Medical College, Hospital,
Aurangabad.

A.R.M.O.
GOVERNMENT MEDICAL COLLEGE
& HOSPITAL, AURANGABAD.


 भारत सरकार
GOVERNMENT OF INDIA


मीना जुगलकिशोर भारुका
Mina Jugalakishor Bharuka
जन्म वर्ष / Year of Birth : 1984
स्त्री / Female




6754 4727 9017


आधार — सामान्य माणसाचा अधिकार


 भारतीय विशिष्ट ओळख प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA


पत्ता D/O जुगलकिशोर भारुका, गुरुद्वारा
मार्ग, 3-3-37, श्रीमंत गल्ली धावणी
मोहल्ला, श्रीनंदाबाद, महाराष्ट्र, 431001

Address: D/O Jugalakishor
Bharuka, behind gurudwara,
3-7-78, shrimant galli dhavni
mohalla, Aurangabad,
Aurangabad (MH), Maharashtra,
431001

 1947
1800 180 1947

 help@uidai.gov.in

 www.uidai.gov.in

 P.O. Box No. 1947,
Bengaluru-560 001



भारतीय विशिष्ट ऎोळख प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India

नॉदविण्याचा क्रमांक / Enrollment No 1218/16370/08960

To,
यामिनी विजय देशमुख
Yamini Vijay Deshmukh
FLAT NO 5, DISHA RESIDENCY
KHIWANSARA PARK
OPP SIDDHIVINAYK TEMPLE GARKHEDA PARISAR
Aurangabad
Aurangabad (MH) Aurangabad
Maharashtra 431001

Ref. 143 / 04E / 283763 / 285285 / P



UE411203257IN



आपला आधार क्रमांक / Your Aadhaar No. :

5752 8914 2185

आधार — सामान्य माणसाचा अधिकार



भारत सरकार
GOVERNMENT OF INDIA

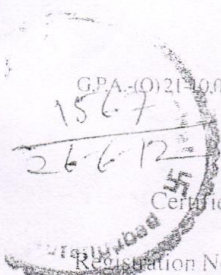


यामिनी विजय देशमुख
Yamini Vijay Deshmukh
जन्म वर्ष / Year of Birth : 1997
स्त्री / Female



5752 8914 2185

आधार — सामान्य माणसाचा अधिकार



Cert. No. 2012/06/03

MEDICAL CERTIFICATE FOR THE DEAF

Certified that I, Dr. Sunil Deshmukh

Registration No. 62782 have this 19th

day of June 2012 examined the candidate whose particulars are given below :-

- 1. Name of candidate ... Aditi Tupkar
- 2. Father's name ... Ganesh Tupkar
- 3. Sex ... Female
- 4. Approximate age ... 13yrs
- 5. Identification mark ... R/L Microtia.

- 6. An estimate of the residual hearing, if any and the basis on which this estimate has been arrived at :
 - (i) Right ear ... (R) 68.33 dB } B/L severe
 - (ii) Left ear ... (L) 63.33 dB } Hearing loss

7. Onset or deafness (Please state whether deafness is from birth or acquired later, if it has been caused afterwards the age and cause of deafness may be indicated.

(For the purpose of scholarship the deaf are those in whom the sense of hearing is non-functional for the ordinary purposes of life. Generally loss of hearing at 70 decibels or above at 500, 1000, 2000 frequencies will make residual hearing non-functional). As per the subjective Test of PTA,

8. Please state clearly whether the candidate is deaf for the purpose of scholarship. The hearing loss is in the range of ~~40-70~~ 50-75%.

9. Please enclose audiogram chart.

PTA No. 2012/06/01

Signature of candidate.



(Signature of Dr. Sunil Deshmukh
कन, श्रवण, वक्त्र विभाग
राज्यीय वैद्यकीय महाविद्यालय, औरंगाबाद

Place GMCH
Aurangabad

Designation
Asso-Professor

Date 19/6/12

Xo
26/6/12
Govt. Medical College & Hospital
Aurangabad

[Signature]
Office Seal
Medical Superintendent
Govt. Medical College, Hospital
Aurangabad.



भारत सरकार



अदिती गणेश तुपकर
Aditi Ganesh Tupkar

जन्म वर्ष / Year of Birth : 1998
स्त्री / Female



2983 0103 5441

आधार — सामान्य माणसाचा अधिकार



आधार

सामान्य माणसाचा अधिकार प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पत्ता C/O: मोहनराव तुपकार, एच एफ
4-18-34-24 भाणुदाम नगर, जवाहर
कोलनी, औरंगाबाद, औरंगाबाद एमएच,
महाराष्ट्र. 431001

Address: C/O: Mohanrao Tupkar,
H NO 4-18-34-24 BHANUDAS
NAGAR, JAWAHAR COLONY,
Aurangabad, Aurangabad (MH),
Maharashtra, 431001

1947
1800 180 1947

help@uidai.gov.in

www.uidai.gov.in

P.O. Box No. 1947,
Bengaluru-560 001