

ATVV Mandal's
B D Kale Mahavidyalaya, Ghodegaon
Resource Centre for Differently Abled Students
Year (2012-13)

Sr.No	Name	Class	Gender
1	Dangale Sanchita Dattatray	T.Y.B.A.	F
2	Darekar Gauri Sunil	F.Y.B.COM.	F
3	Nisal Sonal Suresh	S.Y.B.A.	F

Year (2013-14)

Sr.No	Name	Class	Gender
1	Dangale Sanchita Dattatray	MA I	F
2	Darekar Gauri Sunil	S.Y.B.COM.	F
3	Inamdar Mumtaj Ahmad	F.Y.BA.	F
4	Patkar Shrikant Dattatray	F.Y.B.COM.	M

Year (2014-15)

Sr.No	Name	Class	Gender
1	Dangale Sanchita Dattatray	MA II	F
2	Darekar Gauri Sunil	T.Y.B.COM.	F
3	Inamdar Mumtaj Ahmad	S.Y.B.A.	F

Year (2015-16)

Sr.No	Name	Class	Gender
1	Inamdar Mumtaj Ahmad	T.Y.B.A.	F

Year (2016-17)

Sr.No	Name	Class	Gender
1	Kale Sachin Arun	F.Y.B.COM.	M
2	Pingale Siddesh Shivaji	F.Y.B.COM.	M
3	Gupta Puja Satanand	S.Y.B.A.	F
4	Inamdar Mumtaj Ahmad	MA I	F


Co-ordinator
IQAC
B.D.Kale Mahavidyalaya
Ghodegaon, Dist.Pune




PRINCIPAL
B. D. Kale Mahavidyalaya
Ghodegaon, Dist.Pune

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:

Sassoon Hospitals, Pune
(Maharashtra, India)

Certificate Number: 66087

Date: 26/03/14

This is to certify that I have carefully examined.

Person Identification Number: PI52100097835

Aadhar Number: N/A

Shri/Smt./Kum: Inamdar Mumtaj Ahmad

Father Name: Shri/Smt./Kum. Ahmad Inamdar

Date of Birth (dd/mm/yyyy):

Age: 18 years

Gender: Female

Permanent Address:

House Address: A/P-Chas Tal-Ambegaon

Village: Pune

Taluka: Pune

District: Pune

Pincode: 410515

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 BIL CTEV	41

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

2. Reassessment of disability not necessary

3. The applicant has submitted following documents as proof of residence:

Ration card

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

Ambarish Mathesul
 Dr. Ambarish Mathesul
 DR. AMBARISH A. MATHESUL,
 Orthopedic Surgeon Class-I/Class-IAMS.
 REG. No. 2006/04/2234
 ASSISTANT PROFESSOR
 Regn. No. : 2006/04/2234
 M. C. & SASSOON HOSPITAL

Nitin Hivale
 Dr. Nitin Hivale
 Resident Medical Officer
 Sassoon General Hospital
 Pune-1
 Member Secretary
 Regn. No. : 2007/04/0616

Deepak G. Kulkarni
 Dr. Deepak G. Kulkarni
 Medical Superintendent and
 Chairman Disability Board M. D. (Patho)
 Reg. No. 48671
 President
 Superintendent,
 Sassoon General Hospital, Pune.

Signature/Thumb impression of the person whose favour disability certificate is issued

Note: This is not valid for Medico Legal cases.



B. J. MEDICAL COLLEGE & SASSOON GENERAL HOSPITALS, PUNE
CERTIFICATE OF THE MEDICAL BOARD FOR PERSONS WITH DISABILITIES

NOT FOR COMPENSATION CLAIMS

For general purposes only e.g. employment, special conveyance allowance/scholarships for handicapped persons etc.

Read: 1) Resolution No. FDD/1081/6256591570/CA-13
March 1986 Govt. of Maharashtra, Social Welfare, Mantralaya, Mumbai-1
2) Notification No. 42/81 HW-111/Government of India, Ministry of Social Welfare, Delhi dt. 6th Aug. 1986.



Associate Professor of Medicine
Department of Medicine
B.J. Government Medical College &
Sassoon General Hospital, Pune

Certificate No. 180

Date 17/11/13

This is to certify that Shri./Smt./Kum. Gauri Sunil Darekar
Sgn/wife/daughter of Shri. Sunil Darekar age 18 old male/female,
registration No. 716201 is a case of left hemiparesis see to old TBm

He/She is physically disabled/visually disabled/speech and hearing disabled and has 45 %
(fourty five percent) permanent / temporary (physical impairment / visual impairment / speech
and hearing impairment) in relation to his/her

He/She is fit/unfit for benefits for persons with disabilities.

Note :-

- 1) This condition is progressive/non-progressive/likely to improve / not likely to improve.
- 2) Reassessment is not recommended/is recommended after a period of _____ months / years.
- 3) Audiogram with photograph is attached with certificate.

Marks of identification :

Signature/Thumb Impression
of the patient.

Associate Professor of Medicine
Dept. of ENT of Medicine
Surgery / Medicine / Psychiatry, BJMG, Pune
B.J. Government Medical College &
Sassoon General Hospital, Pune



Resident Medical Officer
Sassoon General Hospital
Pune-1

Handwritten notes and stamps in Marathi, including 'स्वास्थ्य प्रस' and 'सिद्धि'.

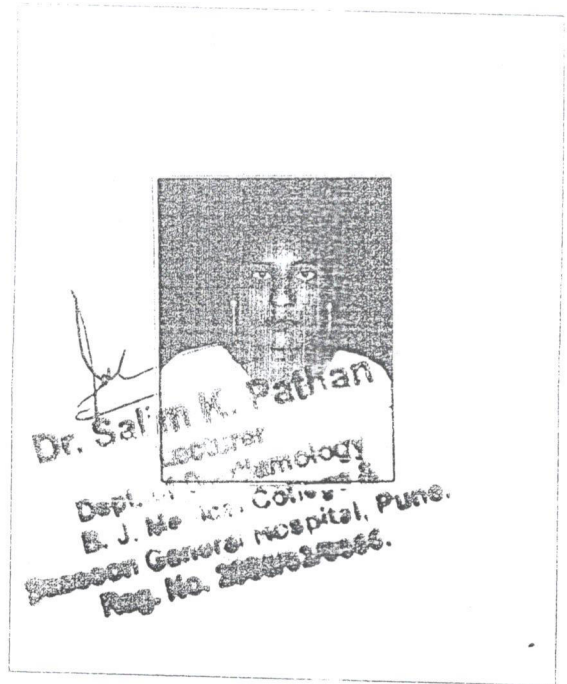
Medical Superintendent
Sassoon General Hospital, Pune.
Dr. D. G. Kulkarni
M. D. (Pathc)
Reg. No. 4867
Superintendent,
Sassoon General Hospital, Pune.

B. J. MEDICAL COLLEGE & SASSOON GENERAL HOSPITALS, PUNE
CERTIFICATE OF THE MEDICAL BOARD FOR PERSONS WITH DISABILITIES

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For general purposes only e.g. employment, special conveyance allowance/scholarships for handicapped persons etc.

Read: 1) Resolution No. FDD/1081/6256591570/CA-13
March 1986 Govt. of Maharashtra, Social Welfare, Mantralaya, Mumbai-1
2) Notification No. 42/81 HW-111/Government of India, Ministry of Social Welfare, Delhi dt. 6th Aug. 1986.



Certificate No. 4627

Date: 03/07/2011

This is to certify that Shri/Smt./Kum. Sachin Dattatray Dangle
Son/wife/daughter of Shri. Dattatray Dangle age 20 old male/female.
registration No. # 464329 is a case of (R) Congenital Nyctagnus

He/She is physically disabled/visually disabled/speech and hearing disabled and has 75% percent permanent / temporary (physical impairment / visual impairment / speech and hearing impairment) in relation to his/her

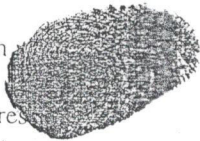
He/She is fit/unfit for benefits for persons with disabilities.

Note :-

- 1) This condition is progressive/non-progressive/likely to improve / not likely to improve.
- 2) Reassessment is not recommended / is recommended after a period of five months / years.
- 3) Audiogram with photograph is attached with certificate

Marks of identification Black mole over (R) side of neck

Signature/Thumb Impression of the patient.



Dr. Salim K. Pathan
Specialist
Dept. of Otorhinolaryngology
Surgery / Medicine / Psychiatry
B. J. Medical College &
Sassoon General Hospital, Pune.
Reg. No. 26001020000.

P. Kulkarni
03/07/11
R.M.O.
Sassoon General Hospital,
Pune.

Resident Medical Officer
Sassoon General Hospital
Pune-1.

D. G. Kulkarni
Medical Superintendent
Sassoon General Hospital,
Pune.
D. D. (Patro)
Reg. No. 4867.

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:

Sassoon Hospitals, Pune

(Maharashtra, India)

Certificate Number: 353236

Date: 07/12/2016

This is to certify that I have carefully examined.

Person Identification Number: **PI52100489843**Aadhar Number: **N/A**Shri/Smt./Kum: **PINGALE. SIDDHESH SHIVAJI ANITA**Father Name: Shri/Smt./Kum. **SHIVAJI PINGALE**Date of Birth (dd/mm/yyyy): **15/09/1997**Age: **19 years**Gender: **Male****Permanent Address:**House Address: **A/P-NARODI, PINGAL PATTI TAL-AMBEGAON.**Village: **Narodi**Taluka: **Ambegaon**District: **Pune**Pincode: **410503**

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	Rt. U/L, Rt. L/L	CP RIGHT HEMIPARESIS	50

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)

Dr. P.D. Deokate

Dr. Snehal Kishor Wadekar

Dr. Ajay A. Taware

Lecturer
DR. PRAVIN DADASAHEB DEOKATE

R.M.O.

Medical Superintendent and
Chairman Disability Board
President

Reg. No. 2006/02/1176

Member Secretary

Regn. No. : 2001/01/0298

Reg. No. : 2006/02/1176

Regn. No. : 2016/05/0954

Dept of Orthopaedics

Resident Medical Officer

Dr. Ajay A. Taware

Signature/Thumb impression of the person whose disability certificate is issued

Sassoon General Hospital

MD. (F.M.T.)

Note: This is not valid for Medico Legal cases.

Pune - 01.

Reg. No. 2001/01/298
Superintendent

Sassoon General Hospital Pune.