## Form-IV

## APPLICATION FOR OBTAINING DISABILITY CERTIFICATE BY PERSONS WITH DISABILITIES

[See rule 18 (1)]

1.	Name		
	(Surname)	(First name)	(Middle name)
2	Fother's name		
۷.	Father's name		
3	Date of Birth		
3.	(Date)		(Year)
4.	Age at the time of application:	` '	· · · · ·
	Sex:	Male/Female	
6.	Address:		
	(a) Permanent address:		
	(b) Current address (i.e. for con	mmunication)	
	(c) Period since when residing	at current address	
7.	Educational Status (Pl. tick as a	applicable)	
	(I) Post Graduate		
	(II) Graduate		
	(III) Diploma		
	(IV) Higher Secondary		
	(V) High School		
	(VII) Primary		
	(VIII) Illiterate		
R	Occupation		

9.	Identification marks
	(i)
	(ii)
10	. Nature of disability: Locomotor/hearing/visual/mental/others
11	. Period since when disabled: From Birth/Since year
12	. (i) Did you ever apply for issue of a disability certificate in the past- YES/NO
	(ii) If yes, details:
	(a) Authority to whom and district in which applied
	(b) Result of application
13	. Have you ever been issued a disability certificate in the past? If yes, please enclose a true
	copy.
	<b>Declaration:</b> I hereby declare that all particulars stated above are true to the best my
	knowledge and belief, and no material information has been concealed or misstated. I
	further, state that if any inaccuracy is detected in the application, I shall be liable to
	forfeiture of any benefits derived and action as per law.
	(Signature or left thumb impression of person with disability, or his/her legal guardian
	in case of person with mental retardation, autism, cerebral palsy and multiple disabilities)
	Date:
	Place:
	Enclosure:
1.	Proof of residence ( Please tick as applicable)
	(a) AADHAR card
	(b) Ration card
	(c) Voter identity card
	(d) Driving license
	(e) Bank passbook
	(f) PAN card
	(g) Passport
	(h) Telephone, electricity, water and any other utility bill indicating the address of the
	applicant
	(i) A certificate of residence issued by a Panchayat, municipality, cantonment board, any

gazette officer, or the concerned Patwari or Head Master of a Govt. School

_			
2.	Two recent passport size photographs		
	(For office only)		
	Date:		
	Place:		
	Signature of issuing auth		
	Sta		

Courtesy NTWS & YTA