

7.1.7

Differently Abled (Divyangan) Friendliness



“Jeevandeep Shaikshanik Sanstha Poi’s”
ARTS, COMMERCE & SCIENCE COLLEGE, GOVELI
(Affiliated to University of Mumbai)
Goveli, Tal-Kalyan, Dist-Thane 421301

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DIVYANGAN POLICY AND INITIATIVES UNDER TAKEN

Objectives of the Policy:

1. TO create Inclusive Culture Lo avoid discrimination, exploitation and exclusion of Disable Students and Staff from all spheres of work and education.
2. To create suitable regulatory mechanism for effective delivery of services to Disable Students and Staff of affiliated colleges, recognized institutions and research centers.
3. To ensure implementation of all legislation with respect to persons with disabilities.

Admission policy for persons with disabilities:

1. The Institute shall make suitable arrangements for Divyangjan Students to give the examination.
2. The examination section will follow the guidelines issued the guidelines by the University of Mumbai in giving extra time.

Facilities and Initiatives Undertaken:

The Institute is having infrastructural facilities like ramp, lift, rest-rooms for examinations.



Principal

Principal
Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal. Kalyan, Dist. Thane-421301

7.1.3. Percentage of differently abled students (Divyagian) on roll



Name of the students under differently abled category	Gender	UDID card Number	Type of Disability	Percentage of Disability	Course Enrolled	Year of Enrolled	Year of Completion
YEAR -2015-16							
Suroshi Nilesh Suresh	Male	1517-0059-0132	Locomot or or Cerebral Palsy	72%	Arts	S.Y.B.A.	2015-16
YEAR -2016-17							
Suroshi Nilesh Suresh	Male	1517-0059-0132	Locomot or or Cerebral Palsy	72%	Arts	T.Y.B.A.	2016-17
Bagul Smita Shivdas	Female	1517-0075-0609	Post polio	55%	Arts	F.Y.B.A.	2016-17
Saudagar Madhuri Sunil	Female	1516-0026-9334	Visual Impirment	75%	Arts	F.Y.B.A.	2016-17
Yerkar Sunil Shivaji	Male	1517-0053-7510	Post Plio	89%	BMM	F.Y.B.M. M	2016-17
YEAR -2017-18							
Bagul Smita Shivdas	Female	1517-0075-0609	Post polio	55%	Arts	S.Y.B.A.	2017-18
Saudagar Madhuri Sunil	Female	1516-0026-9334	Visual Impirment	75%	Arts	S.Y.B.A.	2017-18
Yerkar Sunil Shivaji	Male	1517-0053-7510	Post Plio	89%	BMM	S.Y.B.M. M	2017-18
YEAR -2018-19							
Bagul Smita Shivdas	Female	1517-0075-0609	Post polio	55%	Arts	T.Y.B.A.	2018-19
Saudagar Madhuri Sunil	Female	1516-0026-9334	Visual Impirment	75%	Arts	T.Y.B.A.	2018-19
Yerkar Sunil Shivaji	Male	1517-0053-7510	Post Plio	89%	BMM	T.Y.B.M. M	2018-19

Principal

Jeevandeep Shaikhnik Sanstha's
Arts, Commerce & Science College, Govoli,
Govoli, Tal. Kalyan, Dist. Thane - 401 501.

Government of Maharashtra
Form-IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See Part I)

No. 781220

NAME OF THE HOSPITAL:

General Hospital Ulhasnagar, Thane
(Maharashtra, India)

Certificate Number: 389681

Date: 22/03/2017

This is to certify that I have carefully examined.

Person Identification Number: PI51700537510

Aadhar Number: N/A

Shri/Smt./Kum: YERKAR SUNIL SHIVAJI JAMNABAI

Father Name: Shri/Smt./Kum. SHIVAJI

Date of Birth (dd/mm/yyyy): 04/05/1996

Gender: Male

Permanent Address:

House Address: AMBEDKAR NAGAR, WARD NO. 1, GUPTA BIRANA STORE, MHARALGAON,
KALYAN

Village: Mharal

District: Thane

Age: 20 years



Taluka: Kalyan

Pincode: 421301

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	POST POLIO RESIDUAL PARALYSIS BOTH LOWER LIMB	89

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. Vilas Salvi

Orthopedic Surgeon Class-II

Member

Dr. VILAS R. SALVE
M.S. (ORTHO.)

Dr. J.R. Nimbhore

Additional Civil Surgeon

डॉ. निमोरे जे.आर.
रिजिस्टर्ड सर्जन
एम.एस. (जन. सर्जरी)

Dr. A.B. Nandapurkar

Civil Surgeon

President

Regn. No. : 66498

Signature and Impression of the person in whose favour disability certificate is issued

Signature of Orthopedic Surgeon
Consulting Orthopedic Surgeon
Central Hospital, UlhasnagarDr. Ashok B. Nandapurkar
(Reg. No. 66498)

Civil Surgeon

Central Hospital, Ulhasnagar-3.

Home | Forms | Contact Us

Principal

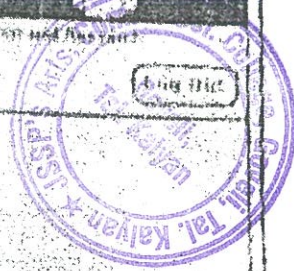
Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Govoli,
Govoli, Tal: Kalyan, Dist: Thane - 421 301.

242/4
67/17

Government of Maharashtra
Form-1A

Disability Certificate

(In cases other than those mentioned in Form-1)



NAME OF THE HOSPITAL

District Hospital, Nashik
(Maharashtra, India)

Cycle Number: 19/884

Date: 21/05/2018

to certify that I have carefully examined

Identification Number: 1151600269134

has Number: N/A

Sent (Name) SAI DAGAR MADHURI SUNIL SUREKHA

er Name: Shri Sunil Kumar SUNIL

of Birth (dd/mm/yyyy):

Age: 22 years

Sex: Female

Permanent Address:

Address: A-507 HARI VIHAR SHAMLI SANRITH NAGAR NEAR HACCHAV CLASSE JAIL ROAD
HUK

ge: Nashik

Talukas: Nashik

ct: Nashik

Pincode: 422101

Photograph is affixed above, and it is stated that the case is of Floral Impairment
ity. His/Her extent of percentage physical impairment/disability has been evaluated as per guidelines and
own against the relevant disability in the table below:

Body	Affected part of Body	Diagnosis	Disability (%)
at Impairment	Both eyes	Bl. Albino-like Fundus	75

Above condition is Permanent, non-progressive, and likely to improve
assessment of disability

Applicant has submitted following documents as proof of residence: Aadhar Card, Ration card, Telephone
rity, Water and any other utility bill indicating the address of the applicant

Applicant has submitted following documents as proof of Identity: Aadhar Card

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

Dr. Rajesh N. Sankhe
Ophthalmic Surgeon
Member
Regn. No. 67247

Dr. G. M. Holey
Additional Civil Surgeon
Member Secretary
Regn. No. 55941

Dr. D. S. Desai
Civil Surgeon
President
Regn. No. 55345

A. H. S. CL-1 (Class) Resident Medical Officer (Clinical)
(Medical Officer)
District Hospital, Nashik

CIVIL SURGEON, NASHIK



महाराष्ट्र शासन
Form-IV



शासन

Disability Certificate

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

Government of Maharashtra

Disability Certificate



No. 783941

NAME OF THE HOSPITAL:

General Hospital Ulhasnagar, Thane
(Maharashtra, India)

Certificate Number: 549885

Date: 18/07/2018

This is to certify that I have carefully examined.

Person Identification Number: PI51790750609

Aadhar Number: N/A

Shri Smt./Kum: BAGUL SMITA SHIVDAS NIRMALA

Father Name: Shri/Smt./Kum. SHIVDAS

Date of Birth (dd/mm/yyyy): 22/09/1987

Age: 30 years

Gender: Female

Permanent Address:

House Address: N.R.C. COLONY, OLD G-21, MOHANE AMBIVALI EAST

Village: Ambivali

District: Thane

Taluka: Kalyan

Pincode: 421102

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	Lt. L/L	POST POLIO RESIDUAL PARALYSIS LEFT LOWER LIMB	55

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. Sachin Shinde

Orthopedic Surgeon

Dr. Sachin S. Shinde

Orthopaedic Surgeon

Regn. No. 2008083083

Central Hospital, Ulhasnagar-2

Dr. Jalar Tadvj

Additional Civil Surgeon

Member Secretary

Regn. No. : 78295

Dr. Sudhakar K. Shinde

Dr. Sudhakar K. Shinde

President (Reg. 62322)

CIVIL SURGEON

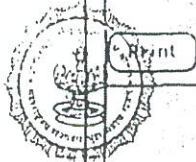
Central Hospital, Ulhasnagar-3

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

Note: This is not valid for Medico Legal cases.

Principal

Joevandeeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Govoli,
Govoli, Tal: Kalyan, Dist. Thane - 421 301.



Government of Maharashtra Disability Certificate

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

No. 782031

NAME OF THE HOSPITAL:

General Hospital Ulhasnagar, Thane
(Maharashtra, India)

Certificate Number: 431954

Date: 09/08/2017

This is to certify that I have carefully examined,
Person Identification Number: P151700590132

Aadhar Number: N/A

Shri/Smt./Kum. **SURESH NILESH SURESH SUREKHA**

Father Name: Shri Smt./Kum. **SURESH**

Date of Birth (dd mm yyyy): **08/07/1989**

Gender: **Male**

Age: 28 years

Permanent Address:

House Address: **AT ANE POST RAYATE TALUK. KALYAN**

Village: **Ane**

District: **Thane**



Taluka: **Kalyan**

Pincode: **421301**

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	LT. U/L, Lt. L/L	LEFT SIDED HEMIPARESIS WITH ATAXIA	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)

Dr. Vilas Salve
Orthopedic Surgeon Class-II
Member

Dr. J.R. Ambhore
Additional Civil Surgeon
Member Secretary

Dr. A.B. Nandapurkar
Civil Surgeon
President

Regn. No. : 071717

Regn. No. : 56551

Regn. No. : 66498

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

Note: This is not valid for medical cases

Dr. Vilas R. Salve
Consulting Orthopedic Surgeon
Central Hospital, Ulhasnagar-3

डॉ. निभोर जे. आर.

नि. निभोर

नि. निभोर

नि. निभोर

नि. निभोर

Dr. Ashok B. Nandapurkar
(Reg. No. 66498)

Civil Surgeon
Central Hospital, Ulhasnagar-3.

Principal

Principal

Principal

Principal



2450-51

09/12/2017

Dr. VILAS R. SALVE
M.S. (ORTHO.)
Regd. No. 071717
Consulting Orthopedic Surgeon
Central Hospital, Ulhasnagar-3

This is to certify that KM/Shri/Smt. Milesh Surashi whose particulars are furnished below is a bonafied ORTHOPEDICALLY HANDICAPPED/PARAPLEGIC PERSON/PATIENTS WHO CANNOT TRAVEL WITHOUT THE ASSISTANCE OF AN ESCORT/MENTALLY RETARDED PERSON WHO CANNOT TRAVEL WITHOUT AN ESCORT/COMPLETELY BLIND PERSON/TOTALLY DEAF& DUMB PERSON*

Address: At Ane Post Rayte
Tal. Kalyan Dis - Thane
b) Father's/Husband's Name: Suresh Surashi

c) Age: 27

d) Sex: M

e) Nature of Handicap (to be written by doctor whether the disability is Temporary or Permanent)

f) Signature or thumb impression of the person seeking concession (not necessary for those with both hand missing or non functional):

(Signature of person seeking concession)
(Signature of Government Doctor)



(Signature of Government Doctor)

Dr. VILAS R. SALVE
M.S. (ORTHO.)

Regd. No. 071717

Consulting Orthopedic Surgeon
Central Hospital, Ulhasnagar-3

Seal containing name and Regn. No. of Doctor

Place: Central Hospital, Ulhasnagar-3

Date: 9/12/2017

Clear seal of Government Hospital



*Strike out what is not applicable.

#For blind person only. Institution for the blind can also issue certificate for blind.

Note: 1) The certificate should be issued only to those ORTHOPEDICALLY HANDICAPPED/PARAPLEGIC PERSON/PATIENTS WHO CANNOT TRAVEL WITHOUT THE ASSISTANCE OF AN ESCORT/MENTALLY RETARDED PERSON WHO CANNOT TRAVEL WITHOUT AN ESCORT/COMPLETELY BLIND PERSON/TOTALLY DEAF& DUMB PERSON. The photo must be signed and stamped in such a way that doctor's signature and stamp appears partly on the photo and partly on the certificate.

2) For Mentally retarded person/Completely blind person/Deaf and dumb persons (both afflictions together), the certificate will be valid for five years from the date of issue. For temporary disability in the case of orthopedically/paraplegic persons, the certificate will be valid for 5 years and in case of permanent disability, the certificate will remain valid for (i) five years, in case of persons upto the age of 25 years, (ii) ten years, in case of persons in the age group of 26 to 35 years and (iii) in case of persons above the age of 35 years, the certificate will remain valid for whole life of the concerned persons. After expiry of the period validity of certificate, the person is required to obtain a fresh certificate.

3) Photocopy of this certificate is accepted for the purpose of grant of concession. The original certificate will have to be produced for inspection at the time of purchase of concessional ticket and during the journey, if demanded.

Principal

Jeevandeep Sh. Babulk Sapthole
Ans. Commercial College
Govelli, Tal. Kalyan, Dist. Thane - 401 211

भारत सरकार
GOVERNMENT OF INDIA



निलेश सुरेश सुरोशी
Nilesh Suresh Suroshi
जन्म तारीख/ DOB: 08/07/1989
पुरुष / MALE



2923 9925 5956



भारतीय विशिष्ट पहचान प्राधिकरण
INDIAN UNIQUE IDENTIFICATION AUTHORITY

पत्ता:
S/O: सुरेश सुरोशी, मु. आणे,
आने, ठाणे,
महाराष्ट्र - 421301

Address:
S/O: Suresh Suroshi, AT. ANE, Ane,
Thane,
Maharashtra - 421301

2923 9925 5956

Principal

Jeevandeep Shaikohnik Sanstha's
Arts, Commerce & Science College, Gwal,
Tal. Kalyan, Dist. Thane - 421 301.



[Signature]

Principal

Jeevandeeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Govoli,
Tal: Kalyan, Dist. Thane - 421 511



[Signature]

Principal

Jeevandeep Shaikohnik Sanstha's
Arts, Commerce & Science College, Govak,
Govak, Tal: Kalyan, Dist. Thane - 421 306.

Date: 6-10-2016

प्रति,
प्राचार्य

गोवर्धी महाविद्यालय



श्री. कु. मिलेरा सुरेश सुरेशी न. यु. व. म.
Sociology मासिक विद्यार्थी असून ही विनंतीपूर्व
अर्ज करत आहे की, माझे मिहरीया रूप प्राप्त होत
असल्याने, हे मिहरीयास जमत नसल्याने
माझे लेखाविकची आवश्यकता असल्याने मला
मरी माझे लेखाविक कागद परितोषा दिलेल्या वेळापत्रा
अद्यापत आधीक मिळावा, ही नम्र विनंती.

Shindekar,
Anand Omkar R. Jais
as writer for
Nilesh S. Surashi

Nilesh Surashi
आपला विश्वासू
कु. मिलेरा सुरेश सुरेशी

6.10.16

Principal



Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College,
Goveli, Tal. Kalyan, Dist. Thane, 421 301
Affiliated to University of Mumbai NAAC Accredited

VERIFIED
VED 0016 17



Name: Shruti S. Sawant
Class: 12th B.C. Sociology
D.O.B.: 10/05/1994
Roll No.: 7726 Blood Group:
Add.: Goveli, Tal. Kalyan, Dist. Thane
Goveli, Tal. Kalyan, Dist. Thane
Goveli, Tal. Kalyan, Dist. Thane

Shruti S. Sawant Student Sign. Principal PRINCIPAL

Principal
Principal
Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal. Kalyan, Dist. Thane - 421 301.



Jeevandeep Shaikshnik Sanstha Poi's
ART, COMMERCE & SCIENCE COLLEGE

No. **34581**

Goveli, Tal. Kalyan, Dist. Thane.

Received From Surashi Nilesh

Date : 21/6/16

Class T-4 (Soci)

Roll No. 7726

Towards Fees for First / Second term for the year 2016/17

Particulars	Amount	Received Fee
1) From Fees		
2) Tuition Fees		
3) Library Fees	3000/-	
4) Gymkhana Fees	200/-	
5) Other Fees / Extra Circular Activity	400/-	
6) Disaster Relief Fund	250/-	
7) Admin. Processing	10/-	10/-
8) Utility Fees	200/-	200/-
9) Magazine Fees	250/-	
10) ID Card & Library Fee	100/-	
11) Group Insurance Fees** [Yuvaraksha]	50/-	50/-
12) Student Welfare Fund	40/-	40/-
13) Development Fees	50/-	50/-
14) Vice Chancellor's Fund	500/-	
15) University Sport & Cultural Activity	20/-	20/-
16) E - Suvidha	30/-	
17) E - Charges	50/-	50/-
18) Laboratory Deposit	20/-	
19) Transcript 5 Copies (Additional Copy Rs. 50/- each)	400/-	250/-
20) Transfer Certificate	1000/-	
21) Bonafide Certificate	100/-	
22) No Objection Certificate	20/-	
23) Industrial Visit Fees	20/-	
24) Alumni Association Fees	500/-	
25) Document Verification Fees	25/-	25/-
26) Project Fees	400/-	
27) Admin. Form Procs Information Brochure	100/-	
28) Enrollement Fees	100/-	
29)	220/-	
30)		
31)		
32)		
Total		

(In words Rs. Six hundred Ninety only 695)

Five only Pay
Cashier

Principal

Jeevandeep Shaikshnik Sanstha's
Arts Commerce & Science College, Goveli,
Goveli, Tal. Kalyan, Dist. Thane - 421 301.

CONCESSION CERTIFICATE

for the purpose of grant of rail concession to Orthopaedically handicapped / Paraplegic persons.

I certify that Shri/Smt/Kum. Nilesh Suresh

whose particulars are furnished below

side Orthopaedically handicapped/paraplegic

SON/PATIENT AND CAN NOT TRAVEL WITHOUT

particulars of the Orthopaedically Handicapped/Paraplegic Person

Address A. A. Thane

Post Raite Tal. Kalyan Dist. Thane

Wife's / Husband's Name Suresh Suresh

no

D. Sex M

of handicap (to be written by Doctor whether the disability is Temporary / permanent)

side hemiparesis

of loss of functional Capacity PPD-70% Seven percent

of thumb impression of Orthopaedically handicapped/Paraplegic person/patient

Thane

7/6/2010



Residence Medical Officer
(Clinical) V. S. General, Thane

Signature of Dr. Jafar Tady Doctor
DR. JAFAR TADY
M.S. ORTHO. D. ORTHO
Orthopaedic Surgeon
Seal, Reg. No. 78295
V. S. General, Thane
Reg. No. of the Doctor

CIVIL SURGEON, THANE

should be issued only to those Handicapped/paraplegic person/patient. The photo must be signed and stamped in such a way that doctor's signature and stamp appears partly and partly on the certificate.

Temporary disability will be valid for five years from the date of issue. In the case of permanent disability, the certificate will remain valid for (1) five years in case of persons upto the age of 25 years (2) ten years in case of age group of 26 to 35 years and (3) in the case of persons above the age of 35 years; the certificate will be valid for whole of the concerned person. After expiry of the period of validity of the certificate, the person is to obtain a fresh certificate. A Photostat copy of the certificate is accepted for the purpose of grant of concession. The original certificate will have to be produced for inspection at the time of purchase of concession for the journey, if demanded. The form is permitted.

सदर अपंगत्वाचा दाखला
कोर्टाच्या कामकाजाकरता प्राप्त
— नेमा नाही

Principal

Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Gavali,
Gavali, Tal: Kalyan, Dist: Thane - 421 301.

ANNEXTURE 1

NAME & ADDRESS OF THE INSTITUTE / HOSPITAL : V-S-G-Hospital Thane

Certificate No. : _____ Date : 29/6/10

DISABILITY CERTIFICATE

This is to certify that Kum./Shri/Smt. Nitesh S.

Sunish

Son / Wife / Daughter of Shri. Sunish Sunish

Age 20 Sex M

Identification mark(s) _____

is suffering from permanent disability of following category.

A. LOCOMOTOR OR CEREBRAL PALSY :

i) BL – Both legs affected but not arms :

ii) BA – Both arms affected

iii) BLA – Both legs and both arms affected :

iv) OL – One leg affected (right or left)

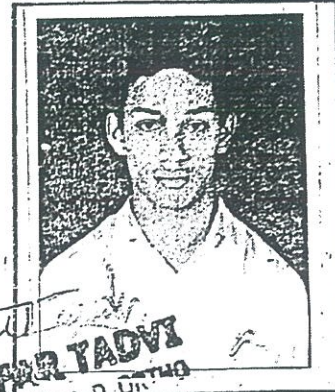
v) OA – One arm affected

vi) BH – Stiff back and hips (cannot sit or sleep) :

vii) MW – Muscular weakness and limited physical endurance.

B) BLINDNESS OR LOW VISION :

i) B - Blind



DR. JAFAR TADVI
M.S. ORTHO. D. ORTHO
Orthopaedic Surgeon
Reg. No. 78295
V.S.G.H. Thane

CP T @ Side hemiparesis
PPD - 70%
Seventy percent

DR. JAFAR TADVI
M.S. ORTHO. D. ORTHO
Orthopaedic Surgeon
Reg. No. 78295
V.S.G.H. Thane

सदर अपंगत्वाचा दाखला
कोर्टाच्या कामकाजाकरिता माह
समयात येणार नाही

Principal

Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal: Kalyan, Dist. Thane - 421 301.

- C. Hearing impairment :
- D-Deaf
 - PD-Partially Deaf



DR. JAFAR TADVI
M.S. ORTHO. D. ORTHO
Orthopaedic Surgeon
Reg. No. 78295
V.S.G.H. Thane

(Delete the category whichever is not applicable)

2. This condition is progressive/non-progressive/likely to improve/not likely to improve. Reassessment of this case is not recommended/is recommended after a period of _____ years _____ months.

3. Percentage of disability in his/her case is CP 70% or hemiparesis 70% Severely percent

4. Sh/Smt/Kum M. H. S. Suresh meets the following physical requirements

for discharge of his/her duties :-

- | | |
|---|--------|
| (i) F-can perform work by manipulating with fingers | Yes/No |
| (ii) PP-can perform work by pulling and pushing | Yes/No |
| (iii) L-can perform work by lifting | Yes/No |
| (iv) KC-can perform work by kneeling and crouching | Yes/No |
| (v) B-can perform work by Bending | Yes/No |
| (vi) S-can perform work by Sitting | Yes/No |
| (vii) ST-can perform work by standing | Yes/No |
| (viii) W-can perform work by walking | Yes/No |
| (ix) SE-can perform work by seeing | Yes/No |
| (x) H-can perform work by hearing/speaking | Yes/No |
| (xi) RW-can perform work by reading and writing | Yes/No |



(Dr. Jafar Tadvil)
DR. JAFAR TADVI
M.S. ORTHO. D. ORTHO
Orthopaedic Surgeon
Reg. No. 78295
V.S.G.H. Thane

(Dr. [Signature])
Residence Medical Officer
(Clinical) V. S. General, Thane

(Dr. [Signature])
CIVIL SURGEON, THANE
Medical Board

Countersigned by the
Medical Superintendent / CMO/ Head of
Hospital (With seal)

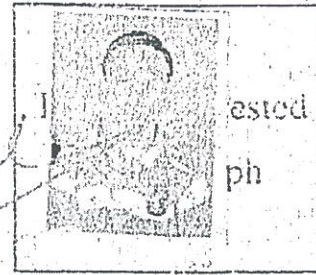
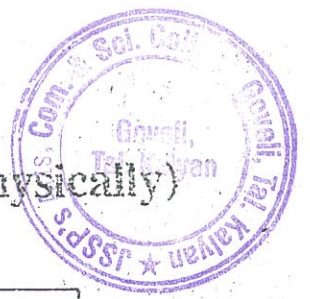
Strike out which is not applicable.

सदर अपंगत्वाचा दाखला
कोर्टाच्या कामकाजाकरता ग्राह
धरण्यात येणार नाही

Principal
Jeevandeep Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal: Kaiyan, Dist. Thane - 421 301.

FORM - III

Medical Certificate in respect of an Orthopedically (Physically) Handicapped or Spastic candidate



For the purpose of concessions granted to Orthopedically (Physically) handicapped or spastic Orthopedically (Physically) handicapped or Spastic are those who have physically defect of body, which causes an interference with the normal functioning of bones, muscles and joints.

Certified that I, Dr. N. S. Gore have this 9. 10. 2005 date 2005 examined the applicant whose particulars are given below and he/she falls within the above definition :-

Name of candidate : NILESH SURESH SORASHI

Identification Mark :

Sex : MALE
 Father's Name : SURESH PADO SORASHI
 Approximate Age : 24

1) Nature of disability

(Tick relevant from following list)

POST-POLIO, PARALYSIS, HEMIPLEGIA.

☒ QUADRAPLEGIA, MALUNITED FRACTURE

NERVE PARALYSIS, UPPER EXTREMITY,

LOWER EXTREMITY, LIMP, PAINFUL, SHORTENING,

DEFORMITY, CONGENITAL ACQUIRED,

ABOVE KNEE, BELOW KNEE, HIP, HEMIPELVECTOMY,

SYMES, CHEOPARTS, WRIST FINGERS, BELOW ELBOW,

ABOVE ELBOW, SHOULDERS, FORE QUARTER,

UNILATERAL, BILATERAL

2) Extent of disability :

Estimate in percentage (mc. Bridge Scale)

ON ANATOMICAL FUNCTIONAL,

(PATIENTS ASSESSMENT, EXAMINER'S ASSESSMENT)

PERCENTAGE (Please state whether the percentage of

disability is 25 or above)

Cp & ...
...
...

...
Principal
Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Govelli,
Govelli, Tal. Kalyan, Dist. Thane - 421 301.

From III/Page 2

To,

The Divisional Secretary
Maharashtra State Board of Secondary &
Higher Secondary Education
Mumbai Divisional Board
Vashi, Navi Mumbai- 400703



Sub : Concessions for Physically Disabled Or Spastic Candidate

Sir,

I have the honour to inform you that SUROSHI NILESH SURESH is a student of this school. As per Medical Certificate the above Candidate is Physically Orthopaedically Handicapped / Spastic therefore please grant the following concessions for S.S.C Examination as per Board's regulations.

1. The candidate be given extra 20 minutes per hour to solve the Question paper.
2. The candidate is unable to complete the course in Physical Education, therefore candidate be exempted from appearing for Physical Education Examination (Subject)
3. The candidate be given nearest examination centre as mentioned below.

Name Of The Examination Place

A.D. Jadhav Kanya Vidyalaya Vajreshwarji

Centre No.

1306

Tal. Bhiwandi, Dist. Thane, (Reference center)

4. The candidate be given all types of concessions as per the Board's regulations.
5. The candidate is to offer and appear for the following subjects.

1. 1st Language MARATHI (01)
2. 2nd Language Hindi (15)
3. 3rd Language English (17)
4. MATHS (71)
5. Science & Tec. (72)
6. Soc. science (73)

Optional Subject

1. K3

School Subjects

1. Environmental Education (Compulsory)
2. Health and Physical Education (Compulsory)
3. Value Education (Compulsory)
4. General Knowledge (Compulsory)
5. Personality Development

Principal

Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Govoli,
Govoli, Tal. Kalvan, Dist. Thane, 400703



Date: 6-10-2016

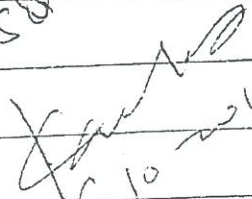
प्रति,
श्री प्राचार्य

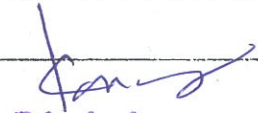
गोवेली महाविद्यालय

मी. कु. ओंकार किरण सासे, F.Y. B.Sc
महेश शिकन आहे. मी स्वताःच्या इच्छेने
कु. गिरीश सुरेश सुरेशी, F.Y. B.A., Sociology
साथी सोडाऱ्या परिक्षेसाठी शत्रु करिता
माखानिक म्हणून दाखणार आहे.


आपला विश्वास
कु. ओंकार किरण सासे.
F.Y. B.Sc.

Shinde Sir,
Pl. accept this student as
writer of
Suroshi


6-10-2016



Principal

Jaeevandeep Shikshnik Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal: Kalyan, Dist: Thane - 421 301.

V.S. General Hospital Thane

Tembhi Naka, Thane 400601

ANNEXTURE I

DISABILITY CERTIFICATE

This is to certify that Kunv Shri. Smita Shivdas

Bagul

Son/Wife/Daughter of Shri. Shivdas Bagul

Age 23 Sex Female

Identification mark (s) _____

Is suffering from permanent disability of following category _____

LOCOMOTOR OR CEREBRAL PALSY:

- | | | |
|---|-------------------|------------------|
| i) BL-Both legs affected but not arms: | a) Impaired reach | b) Weakness Grip |
| ii) BA-Both arms affected | | |
| iii) BLA-Both legs and both arms affected: | a) Impaired reach | b) Weakness Grip |
| iv) OL-One leg affected (right or left) | c) Ataxic | |
| v) OA-One Arm affected | a) Impaired reach | b) Weakness Grip |
| | c) Ataxic | |
| vi) BIL-Slit back and hips (cannot sit or sleep): | | |
| vii) MW-Muscular weakness and limited physical endurance. | | |

IMPAIRED OR LOW VISION:

Reaching impairment:

- a) Blind
b) Deaf

- c) Partially Blind
d) Partially Deaf

(Delete the whichever is not applicable)

This condition is progressive / non-progressive / likely to improve / not likely to improve. Reason of this case is not recommended / is recommended after a period of 34 years - 3 months.

Percentage of disability in his / her case is 80 - 85 percent.

Shri/Smt/Kum. _____ meets the following physical requirements.

or discharge of his/her duties:-

- | | |
|---|----------|
| (i) F-can perform work by manipulating with fingers | Yes / No |
| (ii) PP-can perform work by pulling and pushing | Yes / No |
| (iii) L-can perform work by lifting | Yes / No |
| (iv) K-can perform work by kneeling and crouching | Yes / No |
| (v) B-can perform work by Bending | Yes / No |
| (vi) S-can perform work by sitting | Yes / No |
| (vii) ST-can perform work by standing | Yes / No |
| (viii) N-can perform work by nothing | Yes / No |
| (ix) SE-can perform work by seeing | Yes / No |
| (x) H-can perform work by hearing / speaking | Yes / No |
| (xi) RW-can perform work by speaking and writing | Yes / No |

सदर अपागव्यचि होखला
कोर्टाचा वॉरंटवर जाऊन ता माह
धरण्यात येणारी



Member
Dr. Mahade, Orthro
geon, Civil Hospital, Thane
gistration No. 83117

(Dr. _____)
Member
Resident Medical Officer
(Clinical) Class-1 (Civil Surgeon Cadre)
Civil Hospital, Thane

(Dr. _____)
Chairman
CIVIL SURGEON, THANE
Board

Countersigned by the
Medical Superintendent /CMO/Head of
Hospital (with seal)

Principal

Jeevandeep Shikshak Sanstha's
Arts, Commerce & Science College, Goveli,
Goveli, Tal. Kalyan, Dist. Thane - 421 301.

प्र. प्रवि,
प्राचार्य,
गोवेली महाविद्यालय



विषय:- लेखनिक मिळवता वाचद.

महोदय,

मी मिलेश सुरेश सुरेशी

T.Y.B.A

ह Sociology Roll No. 7726 मा वर्गात

शिकता असुन मला ~~IV~~ Sem KA
Paper No IV मा विषया साठी

लेखनिक ची गरज असुन मला
लेखनिक मिळावी अशी मी विनंती
करित आहे.

मी शारिरीक हज्ज्या अपंग
आहे. तरी मला लेखनिकची आवश्यकता
आहे. म्हणुन मला लेखनिक मिळावा
अशी मी मह विनंती करित

आपला विश्वासू विद्यार्थी

मिलेश

मिलेश सुरेश सुरेशी

Principal

Jeevandeep Shaikshnik Sanstha's
Arts, Commerce & Science College, Gaveli,
Gaveli, Tal: Kalyan, Dist. Thane - 421 301.

प्रति,
प्राचार्य,
गोवेली महाविद्यालय,



विषय :- लेखन कौशल शास्त्राचार्य,

महोदय,

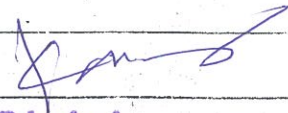
मी ओमकार किरण सासे
शिक्षण असुन मी मिलेश सुरेश सुरेशी F.Y. B.A.
या विद्यार्थ्याचा लेखन कौशल शास्त्राचार्य तयार
आहे. तरी मला आपण परवानगी द्यावी

आपला विश्वासु विद्यार्थी

ओमकार किरण सासे.

Ex-
()

मिलेश सुरेश सुरेशी
31/11/17


Principal

Jeevandeep Shiksha Sanstha's
Arts, Commerce & Science College, Goveli.
Goveli, Tal. Kalyan, Dist. Thane - 421 201