

CERTIFICATE OF DISABILITY

ANNEXURE-I

(As per MCI Gazette Notification No. MCI-18(1)/2018-Med./187262 dated 5th Feb, 2019/ 14th May, 2019 for admission to Medical Courses in All India Quota)

Certificate No. _____ Dated _____
 Name of the Designated Disability Centre (as per ANNEXURE): _____

**Recent Passport
Size Photograph
of the candidate
duly attested by
the issuing
authority**

This to certify that Dr. / Mr. / Ms. _____
 Aged _____ Years Son/ Daughter of Mr. _____
 R/o _____

NEET Roll No. _____, Rank No. _____, has the following
 Disability (Name of the Specified Disability) _____ (in percentage)
 of _____ (in words) _____ (in Figures).

- Please tick on the "Specified Disability"

(Assessment may be done on the basis of Gazette of India, Extraordinary, Part-II, Section 3 Sub-section(ii), Ministry of Social Justice and Empowerment)

S/No.	Disability Type	Type of Disability	Specified Disability
1.	Physical Disability	A. Locomotor Disability* B. Visual Impairment* C. Hearing Impairment* D. Speech & Language Disability	a. Leprosy cured person, b. Cerebral Palsy, c. Dwarfism, d. Muscular Dystrophy, e. Acid attack Victims, f. others such as Amputation, Poliomyelitis a. Blindness b. Low Vision a. Deaf b. Hard of hearing a. Organic/ Neurological causes
2.	Intellectual Disability		a. Specific Learning Disabilities(Perceptual disabilities, Dyslexia, Dyscalculia, Dyspraxia & Developmental Aphasia b. Autism Spectrum Disorders
3.	Mental Behaviour		a. Mental illness
4.	Disability caused due to	a. Chronic Neurological Conditions b. Blood Disorders	i. Multiple Sclerosis ii. Parkinsonism i. Haemophilia, ii. Thalassemia, iii. Sickle Cell Disease
5.	Multiple Disabilities including Deaf Blindness		More than one of the above specified disabilities

- **Conclusion:** He/ She is **Eligible/ Not Eligible** for admission in Medical/ Dental courses as per the MCI Gazette Notification subject to his being otherwise medically fit.
- ❖ Functional competency with the aid of **Assistive devices** in case of **Locomotor*/ Visual*/ Hearing* Impairment**, if any _____

Sign & Name _____
 (Concerned Specialist)

Sign & Name _____
 (Concerned Specialist)

Sign & Name _____
 (Concerned Specialist)

- List of Centres who will issue Disability Certificates as per 21 Benchmark Disabilities given under RPWD Act-2016.

S/No.	Centres who will issue Disability Certificates as per 21 Benchmark Disabilities given under RPWD Act-2016	City/State
1.	Vardhman Mahavir Medical College & Safdarjang Hospital,	New Delhi
2.	All India Institute of Physical Medicine and Rehabilitation (for Locomotor Disability only)	Mumbai
3.	Institute of Post Graduate Medical Education & Research	Kolkata
4.	Madras Medical College	Chennai
5.	Grant Government Medical College, J.J. Hospital Compound	Mumbai, Maharashtra
6.	Goa Medical College	Goa
7.	Government Medical College, Thiruvananthapuram	Thiruvananthapuram, Kerala
8.	SMS Medical College	Jaipur, Rajasthan
9.	Govt. Medical College and Hospital, Sector32	Chandigarh
10.	Govt. Medical College, Agartala, State Disability Board	Agartala/Tripura
11.	Institute of Medical Sciences, Banaras Hindu University,	Varanasi/ Uttar Pradesh