





Department of Empowerment of Persons with Disabilities, Ministry of Social Justice and Empowerment, Government of India

Disability Certificate

Institute Of Human Behaviour And Allied Sciences (ihbas) Shahdara, Delhi



Date: 07/12/2021

Certificate No.: DL0820620060008194

This is to certify that I/we have carefully examined **Parth Goyal**, Son of Shri **Sanjiv Gupta**, Date of Birth **27/12/2006**, Age **17**, M, Registration No. **0708/00000/2108/0236759**, resident of House No. **1/4496**, **Gali No.2 Ram Nagar Exten, Shahdara, North East Delhi, Delhi** - **110032**, Sub District **Shahdara**, District **Shahdara**, State / UT **Delhi**, whose photograph is affixed above, and I am/we are satisfied that:

(A) He is a case of Locomotor Disability

(B) The diagnosis in his case is Cerebellar Ataxia

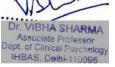
(C) He has **62**%(in figure) **Sixty Two** percent(in words) Permanent Disability in relation to his Brain for All Limbs as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPwD Act, 2016 notified by Government of India vide S.O. 76(E) dated 04/01/2018).

The applicant has submitted the following document(s) as proof of residence:

Nature of Document(s): Aadhaar card

Signature / Thumb Impression of the Person with Disability

ALDRIN ANTHON Regn. No. 22166 (DM Assistant Professor Neuro IHBAS, Delhi-11009)



Signatory of notified Medical Authority Member(s)



Institute Of Human Behaviour And Allied Sciences (ihbas)

Shahdara, Delhi