

**Job Oriented Physical and Functionality Certification**

Recent passport size attested photograph of the person with disability.

**Certificate No:****Date of issue:**

This is to certify that I have carefully examined Shri/Smt/Kum \_\_\_\_\_  
son/wife/daughter of Shri \_\_\_\_\_ Date of Birth (DD/MM/YY) \_\_\_\_/\_\_\_\_/\_\_\_\_ Age  
\_\_\_\_ years, male/female \_\_\_\_\_ with disability certificate No. \_\_\_\_\_

Permanent resident of House No. \_\_\_\_\_ Ward/Village/Street \_\_\_\_\_ Post Office  
\_\_\_\_\_ District \_\_\_\_\_ State Kerala, whose photograph is affixed above, has  
been evaluated for the job oriented physical and functional capabilities, and is shown against the  
physical requirement and Categories of disability.

Physical Requirement		Yes/ No	Physical Requirement		Yes/ No
1	One Arm (OA)		17	Movement (M)	
2	One Leg (OL)		18	Manipulation by Fingers (MF)	
3	One Arm and One Leg (OAL)		19	Observing (Watching) (O)	
4	Both Arms (BA)		20	Picking (P)	
5	Both Leg (BL)		21	Pulling and Pushing (PP)	
6	Both Legs and Arms (BLA)		22	Sitting (S)	
7	Both Legs and One Arm (BLOA)		23	Standing (ST)	
8	Bending (BN)		24	Writing (Wr)	
9	Communication (C)		25	Reading (R)	
10	Climbing (CL)		26	Walking (W)	
11	Crawling (CRL)		27	Seeing (SE)	
12	Hearing (H)		28	Hearing (H)	
13	Holding (Ho)		29	Holding (H)	
14	Jumping (Ju)		30	Jumping (J)	
15	Kneeling & Crouching (KC)		31	Reading & Writing (RW)	
16	Lifting (L)				

One Arm (OA), One Leg (OL), One Arm and One Leg (OAL), Both Arms (BA), Both Leg (BL), Both Legs and Arms (BLA), Both Legs and one arm (BLOA), Bending (BN), Communication (C), Climbing (CL), Crawling (CRL), Hearing (H), Holding (Ho), Jumping (Ju), Kneeling & Crouching (KC), Lifting (L), Movement (M), Manipulation by Fingers (MF), Observing (Watching) (O), Picking (P), Pulling and Pushing (PP), Sitting (S), Standing (ST), Writing (Wr), Reading (R), Walking (W), Seeing (SE), Hearing (H), Holding (Ho), Jumping (J), Reading & Writing (RW)

<b>Categories of Disability</b>			
<b>1. Locomotor Disability (LD)</b>			
<b>Ia</b>	<b>Dwarfism (DW)</b> _____%	<b>Ie</b>	<b>Cerebral Palsy (CP)</b> (√one)
<b>Ib</b>	<b>Leprosy Cured (LC)</b> (√one)  WHO Grading Grade 0 Grade 1 Grade 2		GMFCS Level 1 (<40%) Level II (40-50%) Level III (51-60%) Level IV (61-79%) Level V (80% or more)
<b>Ic</b>	<b>Muscular Dystrophy (MD)</b> _____%		MACS Level 1 (20%) Level II (30%) Level III (40%) Level IV (55%) Level V (70% or more)
<b>Id</b>	<b>Acid Attack Victims (AAV)</b> _____%		
<b>II Visual Impairment (VI)</b>			
<b>IIa</b>	<b>Blindness (B)</b> (√one)  Category IV a - 90% IV b – 100%	<b>IIb</b>	<b>Low Vision (LV)</b> (√one)  Category IIIa (Low Vision 40%) IIIb (Low Vision 50%) IIIc (Low Vision 60%) IIId (Low Vision 70%) IIIE (Low Vision 80%)
<b>III Hearing Impairment (HI)</b>			
<b>IIIa</b>	<b>Deaf (D)</b> (= $\geq$ 70dB loss in Better Ear) Percentage of hearing loss _____	<b>IIIb</b>	<b>Hard of Hearing (HH)</b> (60-70dB loss in Better Ear) . Percentage of hearing loss _____
<b>IIIc</b>	<b>Speech and Language Disability` (SL)</b> _____%		
<b>Category IV and V</b>			
<b>IVa</b>	<b>Autism (ASD)</b> (√one)  Mild          Moderate          Severe	<b>IVc</b>	<b>Specific Learning Disability (SLD)</b>  Percentage of Disability _____%
<b>IVb</b>	<b>Intellectual Disability (ID)</b> (√one)  (Based on adaptive functioning assessment (VSMS) severity scoring will be done and disability for ID charted.) VSMS score 0-20 :Profound      Disability –100% VSMS score 21-35:Severe      Disability – 90% VSMS score 36-54:Moderate      Disability –75% VSMS score 55-69:Mild      Disability –50% VSMS score 70-84:Borderline      Disability –25%	<b>IVd</b>	<b>Mental Illness (MI)</b> (√one)  Total Disability score + DOI SCORE = Global Disability Score Percentages: 0      No Disability      = 0% 1-6      Mild Disability      = <40% 7-13      Moderate Disability      = 40 - 70% 14-19      Severe Disability      = 71-99% 20      Profound Disability      = 100% Cut off for the welfare measures = 40%
<b>V</b>	<b>Category V - Multiple Disability</b>		
	Disability 1 .....%	2 Disabilities – $a + [b \times (90-a)] / 90$ if $a > b$	
	Disability 2 .....%	Overall Disability Percentage .....%	

Authorised Signatory of notified Medical Authority

Name and seal