GOVERNMENT OF MANIPUR DIRECTORATE: SOCIAL WELFARE DEPARTMENT

NOTIFICATION Imphal, the 24th August, 2022

No. 10/281/2021-SW(A&A): Applications are invited from the intending eligible candidates for fitting artificial limbs under the scheme for "Scheme of Assistance to Persons with Disabilities for Purchase/Fitting of Aids and Appliances" for the year 2022-23.

The prescribed application forms may be collected from the respective District Social Welfare Offices on working days from 29th August, 2022 or can be downloaded from Department's website www.socialwelfare.mn.gov.in and the duly filled in application form along with the necessary documents must be submitted to the offices of the District Social Welfare concerned on or before 26th September, 2022.

> (Ng. Uttam Singh) Director, Social Welfare, Manipur

Copy to:

- 1. The PS to the Hon'ble Minister, Social Welfare, Manipur.
- 2. The Additional Chief Secretary (SW), Govt. of Manipur.
- 3. The District Social Welfare Officer concerned. They are requested to kindly collect the prescribed application forms from the Directorate Office (Disability Section) on 26th August, 2022 to make available to the applicants.
- 4. The Editor, for kind publication in your esteemed daily and submit the Bill for early payment.
- 5. IT Section, Directorate of Social Welfare for uploading application form to Department's website
- 6. The relevant file.





GOVERNMENT OF MANIPUR SOCIAL WELFARE DEPARTMENT



APPLICATION FORM FOR AIDS AND ASSISTIVE DEVICES (ARTIFICIAL LIMB) FOR PERSONS WITH DISABILITIES

1. NAME OF APPLICANT (IN BLOCK LETTERS)																						
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																				A		
2. DATE OF BIRTH																						
3. GENDER: Male																						
4. OCCUPATION OF APPLICANT :																						
5. NAME OF FATHER :																						
6. NAME OF MOTHER:												••••										
7 OCCUPATION OF FATHER / MOTHER																						
A. FATHER:B. MOTHER:																						
8. FAMILY INCOME (INCOME CERTIFICATE ISSUED BY COMPETENT AUTHORITY SHOULD BE ENCLOSED) Rs (In word)																						
9. ADDRESS (PRES	ENT) l	N FU	JLL :			T	Τ	T														
						T	T															
P.O.	\prod	Τ		T		Π			P.S	5												
DISTRICT.	\prod			T	T	Τ																
10. ADDRESS (PER	MANE	ENT)	IN FU	ULI	<u>.</u> :[I				I	Ι	Ι	Ι	Ι	Ι	Ι	Ι	Ι				
		П	Т		П	T	T									Γ						
P.O.	\Box	T		T					P.S	3												
DISTRICT.	\Box	Τ		T	Τ	Τ			Τ]												
11.MOBILE NO. OF APPLICANT OR FATHER OR GUARDIAN:																						
12. TYPE OF DISABILITY (VALID DISABILITY CERTIFICATE ISSUED BY COMPETENT AUTHORITY SHOULD BE ENCLOSED): 13. AREA OF DISABILITY: 14. THE PARTICULAR LIMB REQUIRED TO BE FITTED WITH ARTIFICAL LIMB:-																						
15. DISABILITY DUE TO (PLEASE TICK ANY OF THE FOLLOWING)																						

- A. ACCIDENT
- B. CONGENITAL
- C. DISEASE
- D. OR ANY OTHER REASON

16. IDENTITY PROOF (PHOTO COPY OF ANY OF THE FOLLOWING DOCUM	IENTS SHOULD BE
ENCLOSED)	
A. PAN CARD B. AADHAAR CARD C. VOTER ID D. UDID CARD	A LITTION ITS
17. DOMICILE CERTIFICATE (CERTIFICATE ISSUED BY THE COMPETENT A SHOULD BE ENCLOSED)	UTHORITY
18. HAVE YOU EVER BEEN FITTED WITH THE ARTIFICIAL LIMB(s) UNDER THE STATE GOVERNMENT OR CENTRAL GOVERNMENT	ANY SCHEME FROM
A. YES B. NO	
19. IF YES, PLEASE SPECIFY THE NAME OF SCHEME AND YEAR OF FITTIN	G
A. NAME OF THE SCHEME: B. STATE GOVT. OR CENTRAL GOVT. SCHEME OR CSR SCHEME: C. YEAR OF FITTING:	
THUMB IMPRESSION OR SIGNAT	TURE OF APPLICANT
Acknowledgement Card	
Received an application for Aids and Assistive Devices (Artificial Limb) documents from Shri/Smt	
vide R.R. NoDated	

Receiver

GENERAL INFORMATION

Eligibility Criteria

A person with disability fulfilling the following conditions would be eligible for assistance under the Scheme:

- i. Applicants schould be a domicile of the State of Manipur having an AADHAR card or Voter ID(EPIC).
- ii.The Applicant should have the Disability Certificate issued by the Competent Authority with at least 40% of disability.
- iii. The applicant should not have received assistance during the last 3 years for the same purpose from any from any firm / approved organization. However, for children below 12 years of age this limit would be one year.
- iv. The monthly income of the applicant from all sources should not exceed Rs. 15,000/- per month.
- v. In case of dependents the income of parents / guardians should not exceed Rs. 15,000/- per month.
- vi. The income certificate issued by the concerned revenue officer not below the rank of Sub-Deputy Collector in respect of beneficiaries staying in orphanage, half-way home, aged homes etc. shall be accepted.