



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

## Disability Certificate

General Hospital, Ernakulam, Ernakulam, Kerala



Certificate No.: KL5590820130012094

Date: 16/11/2024

This is to certify that I/We have carefully examined Shri **Bion Nixon** Son of Shri **Sam Nixon**, Date of Birth **06/09/2013**, Male, Registration No. **3255/50000/0241/10003288**, resident of **Staff Quarters No B H 3, thevara - 682013**, Sub District **Kanayannur**, District **Ernakulam**, State / UT **Kerala** Whose photograph is affixed above, and I/We satisfied that:

(A) He is a case of **Intellectual Disability**

(B) The diagnosis in his case is **MODERATE INTELLECTUAL DISABILITY**.

(C) He has **75%** (in figure) **seventy five** percent (in words) Permanent Disability in relation to his Brain 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. 1338 (E) Dated 12.03.2024).

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

**Nature of Document(s):** Other (Domicile Certificate)

Signature / Thumb Impression of the Person with Disability

Signature of the Person with Disability

Dr. Shalini R  
Regd. No. 1912  
Superintendent  
General Hospital Ernakulam

Signature of notified Medical Authority Member



General Hospital, Ernakulam  
Ernakulam, Kerala



This Card/Certificate is meant to certify the disability of the person and is not an instrument for ID/Address Proof for any purpose.