



student number	name of paper band	university code	year, month, day, hour
Student Number	Name of the Student	University Code	Year, Month, Day, Hour
00	VEL	LD	090985

[illegible][illegible]

The holder of the Healthy Care for Persons with Disabilities is eligible to claim reimbursement provided by United Government (State Government, Regional Bodies and others) and assistance in accordance with the ICF/AZ. Contributions issued by Social Institutions from time to time.