

CERTIFICATE OF LOCOMOTOR DISABILITY
(For Admission to Veterinary Courses under 15% All India Quota)

Certificate No. _____ Dated _____

This is to certify that Mr./Ms. _____
Aged _____ Years Son/Daughter of _____
r/o _____

Rank No. _____ is suffering From _____
(Name of The Disease) and has Permanent Physical Impairment (PPI) of Left/Right Lower Limb.
He/She is Locomotor disabled and has the percentage of _____ (in words) _____ (in Figure) of
(40% - 50%) disability of any one of the lower limb.

He/She is eligible/NOT eligible for admission in Veterinary Courses as per the Veterinary Council of India guidelines subject to his/her being otherwise medically fit.

Recent passport size
photograph of the candidate
duly attested by issuing
authority

Sign. & Name _____
Name _____
(Specialist, Deptt. PMR)
Ortho.)

Sign. & Name _____
(Specialist, Deptt. Ortho.)

Sign. & _____
(Specialist, Deptt. PMR/
Ortho.)