

**CERTIFICATE OF MENTAL RETARDATION FOR GOVERNMENT
BENEFITS.**

This is to certify that Shri./Smt./Kum
Son/Daughter ofof village/town/city
..... with particulars given below:

- a) Age
- b) Sex
- c) Signature/Thumb Impression.

CATEGORISATION OF METNAL RETARDATION

Mild/Moderate/Severe/Profound

Validity of the Certificate: Permanent

Signature of the Government
Doctor/Hospital with seal
Chairperson Mental Retardation
Certification Board

Recent Attested Photograph
Showing the disability affixed
Here.

Date:

Place: