



सत्यमेव जयते

राजस्थान राज-पत्र  
विशेषांक

RAJASTHAN GAZETTE  
Extraordinary

साधिकार प्रकाशित

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राज्य सरकार तथा अन्य राज्य-प्राधिकारियों द्वारा जारी किये गये  
(सामान्य आदेशों, उप-विधियों आदि को सम्मिलित करते हुए)  
सामान्य कानूनी नियम।

**SOCIAL JUSTICE & EMPOWERMENT DEPARTMENT  
NOTIFICATION**

**Jaipur, July 21, 2011**

**G.S.R. 55.**-In exercise of the powers conferred by section 73 of the Persons With Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (Central Act No. 1 of 1996), the State Government hereby makes the following rules, namely :-

**CHAPTER - I  
PRELIMINARY**

**1. Short title and commencement.**-(1) These rules may be called the Rajasthan Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Rules, 2011 .

(2) They shall come into force on the date of their publication in the Official Gazette.

**2. Definitions.**-(1)In these rules, unless the context otherwise requires,-

- (a) "Act" means the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 (Central Act No. 1 of 1996);
- (b) "Certificate" or "Disability Certificate" means a certificate issued in pursuance of clause (t) of section 2 of the Act;

- (c) "Chairperson" means a Chairperson appointed under the Act;
- (d) "Form" means a form appended to these rules;
- (e) "Medical Authority" means Medical Authority specified by the Government;
- (f) "Member" means a Member appointed under the Act;
- (g) "Member-Secretary" means a Member-Secretary appointed under the Act;
- (h) "Multiple Disabilities" means a combination of two or more disabilities as defined in clause (i) of section (2) of the Act;
- (i) "Section" means a section of the Act;
- (j) "Special Employment Exchange" means employment exchange which is notified by the State Government as Special Employment Exchange;
- (k) "Vice-Chairperson" means a Vice-Chairperson appointed under the Act; and
- (l) "Year" means the financial year commencing on the first day of April."

(2) The words and expressions defined in the Act but not defined in these rules, shall have the same meaning as assigned to them in the Act.

## Chapter - II

### Disability Certificate

3. **Application for issue of Disability Certificate.**-(1) A person with disability desirous of getting a certificate in his favour shall submit an application in Form-I, and the application shall be accompanied by -

- (a) proof of residence, and  
(b) two recent passport size photographs.

(2) The application shall be submitted to -

- (a) a medical authority competent to issue such a certificate in the district of the applicant's residence as mentioned in the proof of residence submitted by him with the application, or

- (b) the concerned medical authority in a government hospital where he may be undergoing or may have undergone treatment in connection with his disability:

Provided that where a person with disability is a minor or suffering from mental retardation or any other disability which renders him unfit or unable to make such an application himself, the application on his behalf may be made by his **legal** guardian.

**4. Issue of Disability Certificate.**-(1) On receipt of an application under rule 3, the medical authority shall, after satisfying himself that the applicant is a person with disability as defined in sub-clause (t) of section 2 of the Act, issue a disability certificate in his favour in Form-II, Form-III or Form-IV, as the case may be.

(2) The certificate shall be issued as far as possible, within a week from the date of receipt of the application by the medical authority, but in any case, not later than one month from such date.

(3) The medical authority shall, after due examination,-

- (a) give a permanent disability certificate in cases where there are no chances of variation, over time, in the degree of disability, and
- (b) shall indicate the period of validity in the certificate, in cases where there is any chance of variation, over time, in the degree of disability.

(4) If an applicant is found ineligible for issue of disability certificate, the medical authority shall explain to him the reasons for rejection of his application, and shall also convey the reasons to him in writing in Form-V.

(5) A copy of every disability certificate issued under these rules by a medical authority other than the Chief Medical Officer shall be simultaneously sent by such medical authority to the Chief Medical Officer of the District.

(6) No fee shall be payable by persons with disabilities to any Medical Authority for any medical examination or grant of certificate under these rules.

**5. Review of decision regarding issue of, or refusal to issue, a disability certificate.**-(1) Any applicant for a disability certificate, who is aggrieved by the nature of a certificate issued to him, or by refusal to issue such a certificate in his favour, as the case may be, may represent against such a decision to the medical authority as specified for the purpose by the Government:

Provided that where a person with disability is a minor or suffering from mental retardation or any other disability which renders him unfit or unable to make such application himself, the application on his behalf may be made by his legal guardian.

(2) The application for review shall be accompanied by a copy of the certificate or letter of rejection being appealed against.

(3) On receipt of an application for review, the medical authority shall, after giving the appellant an opportunity of being heard, pass such orders on it as it may deem appropriate.

(4) An application for review shall, as far as possible, be disposed of within a fortnight from the date of its receipt, but in any case, not later than one month from such date.

**6. Certificate issued under rule 4 to be generally valid for all purposes.**-A certificate issued under rule 4 shall render a person eligible to apply for recruitment and appointment and avail facilities, concessions and benefits admissible under schemes of the Government and of Non-Government Organizations funded by the Government, subject to such conditions as may be specified in relevant schemes or instructions of Government.

### CHAPTER - III

#### THE STATE COORDINATION COMMITTEE

**7. Membership Roll.**- The Member-Secretary shall keep a record of names and addresses of the members of the State Coordination Committee.

**8. Change of Address.**- If a member changes his address, he shall intimate his new address to the Member-Secretary who shall thereupon enter his new address, in the official records but if he fails to intimate his new address, the address in the official

records shall for all purposes be deemed to be member's correct address.

**9. Daily and Traveling Allowances.**-(1) Non-official members of the State Coordination Committee, resident of the place of meeting, shall be paid daily allowance as admissible to a Grade-I officer of the State Government for each day of the actual meeting of the State Coordination Committee as per the State Government rules.

(2) Non-official members of the State Coordination Committee, not resident of the place of meeting shall be paid daily and traveling allowances for each day of the actual meeting as admissible to a Grade-I officer of the State Government as per State Government rules:

Provided that in case of a member of State Legislature who is also a member of the State Coordination Committee, the said daily and traveling allowances shall be paid at the rates admissible to him as member of State Legislature on production of a certificate by the member that he has not drawn any such allowance for the same journey and halts from any other Government source.

**10. Notice of meetings.**-(1) The meetings of the State Coordination Committee shall ordinarily be held at the State Headquarters on such dates as may be fixed by the Chairperson:

Provided that it shall meet at least once in every six months.

(2) The Chairperson shall, upon the written request of not less than 10 members of the State Coordination Committee, call a special meeting of the State Coordination Committee.

(3) Fifteen clear days' notice of an ordinary meeting and five clear days' notice of a special meeting specifying the time and the place at which such meeting is to be held and the business to be transacted thereat, shall be given by the Member-Secretary to the members.

(4) Notice of a meeting may be given to the members by delivering the same by messenger or sending it by registered post to his address as available in the official record of the Member-

Secretary or in such other manner as the Chairperson, may, in the circumstances of the case, think fit.

(5) No member shall be entitled to bring forward for the consideration of the meeting any matter of which he has not given 10 clear days' notice to the Member-Secretary, unless the Chairperson, in his discretion, permits him to do so.

(6) (a) The State Coordination Committee may adjourn its meetings from day to day or to any particular day.

(b) Where a meeting of the State Coordination Committee is adjourned from day to day, notice of such adjourned meeting shall be given to the members present in the meeting at the time of adjournment and to those who are not present but they are residents of the city, town, or place where the meeting which is adjourned if held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(c) Where a meeting of the State Coordination Committee is adjourned not from day to day but from the day on which the meeting is to be held to another date, notice of such meeting shall be given to all the members as provided in sub-rule (4).

**11. Presiding Officer.**-The Chairperson shall preside at every meeting of the committee, at which he is present, and in his absence, the Vice-Chairperson shall preside, but when both the Chairperson and the Vice-Chairperson are absent from any meeting, the members present shall elect one of the members to preside at that meeting.

**12. Quorum.**-(1) One-third of the total members shall form the quorum for any meeting.

(2) If at any time fixed for any meeting or during the course of any meeting less than one-third of the total members are present, the Chairperson may adjourn the meeting till such time on the

same day as he thinks fit or for the following day or for some other future date.

(3) No quorum shall be necessary for the adjourned meeting.

(4) A matter which had not been on the agenda of the original meeting shall not be discussed at such adjourned meeting.

(5) (a) Where a meeting of the State Coordination Committee is adjourned under sub-rule (2) above for want of quorum to the following day, notice of such adjourned meeting shall be given to the members available at the place where the meeting which is adjourned is held either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(b) Where a meeting of the State Coordination Committee is adjourned under sub-rule (2) for want of quorum not to the following date but to the another date, notice of such adjourned meeting shall be given to all the members as provided in sub-rule (4) of rule 10.

**13. Minutes of the meeting.**-(1) Record shall be kept of the names of members who attend the meeting and of the proceedings at the meeting in a book to be maintained for that purpose by the Member-Secretary.

(2) The minutes of the previous meeting shall be read at the beginning of the every succeeding meeting and shall be confirmed and signed by the Presiding Officer at such meeting.

(3) The proceedings shall be open to inspection by any member at the office of the Member-Secretary during office hours.

**14. Absence from meetings of State Coordination Committee.**-If a nominated member of the State Coordination Committee remains absent in three consecutive meetings without prior information to the Chairperson, the matter shall be reported to the State Government by the Member-Secretary.

**15. Maintaining order at meeting.**-The Presiding Officer shall maintain order at the meeting.

**16. Business to be transacted at meeting.**-(1) Except with the permission of the Presiding Officer, no business which is not entered in the agenda or of which notice has not been given by a member under sub-rule (5) of rule 10, shall be transacted at any meeting.

(2) At any meeting business shall be transacted in the order in which it is entered in the agenda, unless otherwise resolved in the meeting with permission of the Presiding Officer.

**17. Decision by majority.**-All questions considered at a meeting of the committee shall be decided by a majority of votes of the members present and voting and in the event of equality of votes, the Chairperson, or in the absence of Chairperson, the Vice-Chairperson or in the absence of both the Chairperson and the Vice-Chairperson, the member presiding at the meeting, as the case may be, shall have a second or casting vote.

**18. No proceeding to be invalid due to vacancy or any defect.**- No proceeding of the State Coordination Committee shall be invalid merely by reasons of existence of any vacancy or any defect in the constitution of the Committee.

#### CHAPTER - IV

#### THE STATE EXECUTIVE COMMITTEE

**19. Daily and Traveling Allowances.**-(1) Non-official members of the State Executive Committee, resident of the place of meeting shall be paid daily allowance as admissible to a Grade-I officer of State Government for each day of the actual meetings of the State Executive Committee as per State Government rules.

(2) Non-official members of the State Executive Committee, not resident of the place of meeting shall be paid daily and traveling allowances as admissible to a Grade-I Officer of the State Government as per State Government rules.

**20. Notice of meetings.**-(1) The meetings of the State Executive Committee shall ordinarily be held at the State headquarter, on such dates as may be fixed by the Chairperson:

Provided that it shall meet at least once in every three months.



(2) The Chairperson shall, upon the written request of not less than 10 members of the State Executive Committee, call a special meeting of the State Executive Committee.

(3) Fifteen clear days' notice of an ordinary meeting and five clear days' notice of a special meeting specifying the time and the place at which such meeting is to be held and the business to be transacted thereat, shall be given by the Member-Secretary to the members.

(4) Notice of a meeting may be given to the members by delivering the same by messenger or sending it by registered post to his last known address as available in official record or in such other manner as the Chairperson may in the circumstances of the case, think fit.

(5) No member shall be entitled to bring forward for the consideration of the meeting any matter of which he has not given ten clear days' notice to the Member-Secretary, unless the Chairperson, in his discretion, permits him to do so.

(6) (a) The State Executive Committee may adjourn its meetings from day to day or to any particular day.

(b) Where a meeting of the State Executive Committee is adjourned from day to day, notice of such adjourned meeting shall be given to the members available at place where the meeting which is adjourned if held, by messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(c) Where a meeting of the State Executive Committee is adjourned not from day to day but from day on which the meeting is to be held to another date, notice of such meeting shall be given to all the members as provided in sub-rule (4).

**21. Presiding Officer.**-The Chairperson shall preside at every meeting of the committee at which he is present, and in his absence, the members present shall elect one of the members to preside at that meeting.

**22. Quorum.**-(1) One-third of the total members shall form the quorum for any meeting.

(2) If at any time fixed for any meeting or during the course of any meeting less than one-third of the total members are present, the Chairperson may adjourn the meeting to such hours on the following or on some other future date as he may fix.

(3) No quorum shall be necessary for the adjourned meeting.

(4) No matter which had not been on the agenda of the original meeting shall be discussed at such adjourned meeting.

(5) (a) Where a meeting of the State Executive Committee is adjourned under sub-rule (2) for want of quorum to the following day, notice of such adjourned meeting shall be given to the members available at the place, where the meeting which is adjourned is held, either by telephone or by special messenger and it shall not be necessary to give notice of the adjourned meeting to other members.

(b) Where a meeting of the State Executive Committee is adjourned under sub-rule (2) for want of quorum not to the following date but to another date, notice of such adjourned meeting shall be given to all the members as provided in sub-rule (4) of rule 20.

**23. Minutes of meeting.**-(1) Record shall be kept of the names of members who attend the meeting and of the proceedings at the meeting in a book to be maintained for that purpose by the Member-Secretary.

(2) The minutes of the previous meeting shall be read at the beginning of the every succeeding meeting and shall be confirmed and signed by the Presiding Officer at such meeting.

(3) The proceedings shall be open to inspection by any member at the office of the Member-Secretary during office hours.

**24. Absence from meetings of State Executive Committee.**-If a member of the State Executive Committee

remains absent in three consecutive meetings without prior information to the Chairperson, the matter shall be reported to the State Government by the Member-Secretary.

**25. Maintaining order at meeting.**-The Presiding Officer shall maintain order at the meeting.

**26. Business to be transacted at meeting.**-(1) Except with the permission of the Presiding Officer, no business which is not entered in the agenda or of which notice has not been given by a member under sub-rule (5) of rule 20, shall be transacted at any meeting.

(2) At any meeting business shall be transacted in the order in which it is entered in the agenda, unless otherwise, resolved in the meeting with the permission of the Presiding Officer.

**27. Decision by majority.**-All questions considered at a meeting of the committee shall be decided by a majority of votes of the members present and voting and in the event of equality of votes, the Chairperson or in the absence of

Chairperson, the Vice Chairperson or in the absence of Chairperson and Vice Chairperson, the member presiding at the meeting, as the case may be, shall have a second or casting vote.

**28. No proceedings to be invalid due to vacancy or any defect.**-No proceedings of the State Executive Committee shall be invalid merely by reasons of existence of any vacancy in or any defect in the constitution of the committee:

**29. Association of Persons for assistance and advice to State Executive Committee.**-(1) The State Executive Committee may invite any person, whose assistance or advice is considered useful in performing any of its functions, to participate in the deliberations of any of its meetings.

(2) If the person associated with the State Executive Committee under sub-rule (1), resident of the place of meeting shall be entitled to get daily allowance as admissible to a Grade-I officer of State Government, for each day of actual meeting of the State Executive Committee in which he is so associated, as per State Government rules.

(3) If such a person is not resident of the place of meeting he shall be paid daily and traveling allowances for each day of the actual meeting in which he is so associated, as admissible to a Grade-I officer of the State Government as per State Government rules.

(4) If such person is a Government employee or an employee in a Government Undertaking, he shall be entitled to traveling and daily allowances only at the rates admissible under the relevant rules applicable to him on production of a certificate by him that he has not drawn any such allowance for the same journey and halts from any other Government source.

**30. Fee for the associated person.**-Notwithstanding anything contained in rule 29, the State Executive Committee may pay the person associated with the Committee, with the prior approval of the State Government such fees as considered appropriate depending on the nature of work assigned, and the qualification and experience of the associated person:

Provided that the State Executive Committee shall not associate any person without the prior approval of the State Government, if the period of association exceeds one month,

**31. Tours by associated person.**-The associated person may, with the prior approval of the Chairperson, undertake tours within the country for the performance of the duties entrusted to him by the State Executive Committee and in respect of such tours shall be entitled to traveling and daily allowances at the rates admissible to a Grade-I officer of the State Government as per State Government rules.

**32. Associated person not to disclose any information.**-The associated person shall not disclose any information either given by the State Executive Committee or obtained during the performance of the duties assigned to him either from the State Executive Committee or otherwise, to any person other than the State Executive Committee without the written permission of the Chairperson of the Committee.

**33. Duties and functions of the associated person.-** The associated person shall discharge such duties and perform such functions as are assigned to him, by the State Executive Committee.

#### CHAPTER-V EMPLOYMENT

**34. Employment of Persons with Disabilities.-**For the purpose of employment, persons with disabilities in various categories of posts are to be identified under section 32 for reservation of persons with disabilities.

**35. Eligibility.-** Notwithstanding anything contained in any rules or orders for the time being in force regulating the recruitment and conditions of service of persons appointed to the various services or posts in connection with the affairs of every establishment including the Government Department, Persons with Disabilities shall be eligible for appointment to the posts identified for them under rule 36 of these rules provided they fulfill the qualifications laid down in the relevant recruitment or service rules for the posts and are functionally able to perform the duties of the posts of the said services.

**36. Reservation for Persons with Disabilities.-**In every establishment three percent of the vacancies shall be reserved for persons or class of Persons with Disabilities of which one percent each shall be reserved for persons suffering from :-

- (i) blindness or low vision;
- (ii) hearing impairment;
- (iii) Locomotor disability or cerebral palsy.

In the posts identified for each disability by the Government of India under section 32 and such reservation shall be treated as horizontal reservation:

Provided that where the nomenclature of any post in the State Government is different from the post in Government of India or any post in the State Government does not exist in any department of the Government of India, the matter shall be referred

to the Committee constituted under rule 38 for identification of the equivalent post in the State Government. The Committee shall identify the equivalent post on the basis of nature of job and responsibility of each post.

**37. Maintenance of Rosters.**-(1) All establishments shall maintain separate 100 point reservation roster registers for determining/effecting reservation for the disabled.

(2) Each register shall have cycle of 100 points and each cycle of 100 points shall be divided into three blocks, comprising the following points:

1st Block - Point No. 1 to point No. 33

2nd Block - Point No. 34 to point No. 66

3rd Block - Point No. 67 to point No. 100

(3) Points 1, 34 and 67 of the roster shall be earmarked and reserved for persons with disabilities-one point for each of the three categories of disabilities. The head of the establishment shall decide the categories of disabilities for which the points 1, 34 and 67 will be reserved keeping in view all relevant facts.

(4) All the vacancies shall be entered in the relevant roster register. If the post falling at point no.1 is not identified for the disabled or the head of the establishment considers it desirable not to fill it up by a disabled person or it is not possible to fill up that post by the disabled for any other reason, one of the vacancies falling at any of the points from 2 to 33 shall be treated as reserved for the disabled and filled as such. Likewise a vacancy falling at any of the points from 34 to 66 or from 67 to 100 shall be filled by the disabled. The purpose of keeping points 1, 34 and 67 as reserved is to fill up the first available suitable vacancy from 1 to 33, first available suitable vacancy from 34 to 66 and first available suitable vacancy from 67 to 100 by persons with disabilities.

(5) There is a possibility that none of the vacancies from 1 to 33 is suitable for any category of the disabled. In that case two vacancies from 34 to 66 shall be filled as reserved for persons with disabilities. If the vacancies from 34 to 66 are also not suitable for

any category, three vacancies shall be filled as reserved from the third block containing points from 67 to 100. This means that if no vacancy can be reserved in a particular block, it shall be carried into the next block.

(6) After all the 100 points of the roster are covered, a fresh cycle of 100 points shall start.

(7) If the number of vacancies in a year is such as to cover only one block or two, discretion as to which category of the disabled should be accommodated first shall vest in the head of the establishment, who shall decide on the basis of the nature of the post, the level of representation of the specific disabled category in the concerned grade/post etc.

**38. Relaxation.-** (1) Where an Appointing Authority is of the opinion that functions or certain jobs of the post reserved under these rules cannot be carried out by the persons with disabilities the Appointing Authority concerned shall indicate such post(s) to the Director/Commissioner, Social Justice & Empowerment, Rajasthan for allowing exemption from the operation of the reservation prescribed in rule 36 of these rules.

(2) The case referred to by the Appointing Authority under sub-rule (1) above shall be placed before the Committee by the Director/Commissioner, Social Justice & Empowerment Department. The Committee shall be as under:-

(a) For the post in connection with the affairs of the State and falling within the purview of the Rajasthan Public Service Commission;

|      |                                                                                                 |          |
|------|-------------------------------------------------------------------------------------------------|----------|
| i)   | Chairman of the Rajasthan Public Service Commission or a member thereof nominated by him.       | Chairman |
| ii)  | Principal Secretary/Secretary to the Government in the Social Justice & Empowerment Department. | Member   |
| iii) | Commissioner for Disabilities, Rajasthan                                                        | Member   |
| iv)  | Principal Secretary/Secretary to the                                                            | Member   |

|      |                                                                                                                                                                                         |                  |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
|      | Government in the department of personnel or his representative not below the rank of deputy Secretary.                                                                                 |                  |
| v)   | Commissioner, Employment Department                                                                                                                                                     | Member           |
| vi)  | Principal Secretary, Medical & Health Department; and                                                                                                                                   | Member           |
| vii) | Secretary of the Administrative Department concerned where Appointing Authority is the Government and in other cases the Appointing Authority as defined in the relevant service rules. | Member Secretary |

(b) For the posts falling outside the purview of the Rajasthan Public Service Commission:-

|      |                                                                                          |                  |
|------|------------------------------------------------------------------------------------------|------------------|
| i)   | Principal Secretary/Secretary to the Government in the Department of Personnel.          | Member           |
| ii)  | The Commissioner for Disabilities, Rajasthan                                             | Member           |
| iii) | Principal Secretary/Secretary to the Government, Social Justice & Empowerment Department | Member           |
| iv)  | The Commissioner, Employment Department, Rajasthan                                       | Member           |
| v)   | The Principal Secretary of Medical and Health Services, Rajasthan                        | Member           |
| vi)  | The Appointing Authority concerned                                                       | Member Secretary |

(3) The Committee constituted under sub-rule (2) shall after considering the proposals received for exemption either allow complete exemption from the operation of the reservation prescribed under rule 36 for persons with disabilities for these posts or shall transfer the reservation prescribed under rule 36 for persons with disabilities to such other category of posts where such disability would not be a hindrance.



(4) Where in any recruitment year any vacancy reserved under rule 36 cannot be filled up due to non-availability of a suitable person with disability or for any other sufficient reason, such vacancy shall be carried forward and filled up as per provisions of section 36 of the Act.

(5) While selecting a person for appointment on any post identified suitable for any category of persons with disabilities, if other things are equal between the person with such disability and the person without disability, preference shall be given to the person with disability even in the excess for the reservation prescribed for them.

**39. Relaxation in age.-** The maximum age limit prescribed in the service rules for appointment to the posts specified under rule 36 may be relaxed as under including the relaxation already prescribed under the relevant service rules:-

- (i) 10 years for candidates belonging to General Category;
- (ii) 13 years for candidates belonging to Backward Classes and Special Backward Classes; and
- (iii) 15 years for candidates belonging to the Scheduled Castes or the Scheduled Tribes:

Provided that in cases of exceptional hardship the State Government may further relax the age limit.

**40. Concessions.-** Following concessions shall be allowed to the Person with disabilities for making him eligible for employment mentioned in rule 36:-

- (i) 5 percentage of qualifying or pass marks in individual paper and in aggregate marks, wherever prescribed in any examination.
- (ii) The academic qualification given in the certificate issued by the recognised Institute meant for the person with hearing impairment shall be considered at par with those other Institutions recognised by the Government.

- (iii) The condition or desirability of training/tests/experience whenever prescribed shall not apply to the disabled person for temporary appointment. Where a particular training is essential for appointment to a post, the disabled person may be required to received such training with in two years of his appointment."

**41. Traveling Expenses.**—The persons with disabilities shall avail II<sup>nd</sup> Class fair by Railway or actual ordinary Bus fair, as the case may be, for to and from journey for appearing at the interview, test or examination for employment.

**42. Persons employed if disabled later.**—Persons already in employment of the establishment including the Government Departments, who acquired disability, shall also be entitled to relaxation of physical and medical examination, if any provided in the relevant service rules and may be absorbed or adjusted on any other alternative post to which he is eligible with the approval of the State Government.

**43. Information of vacancies.**—(1)The employer of every establishment in respect of which the State Government is the appropriate Government under the Act shall furnish such information and return as prescribed in these rules, in relation to vacancies appointed for persons with disability that have occurred or are about to occur in that establishment, to such Special Employment Exchange as may be specified by the State Government by notification in the Official Gazette.

(2)The Special Employment Exchange shall send a copy of such information of vacancies to the Commissioner of Persons with Disabilities, Rajasthan.

**44. Form and manner of information of vacancies.**—(1) The vacancies shall be informed in writing and the following particulars shall be furnished where practicable, in respect of each type of vacancy :-

1. Name and address of the employer;
2. Telephone number of the employer; if any

3. Nature of vacancy—
  - (a) Type of workers employees required (Designation);
  - (b) Description of duties;
  - (c) Qualifications required—
    - (i) Essential
    - (ii) Desirable
  - (d) Age limits, if any;
  - (e) Whether women are eligible?
4. Number of vacancies—
  - (a) Regular
  - (b) Temporary
5. Break up of vacancies—
  - (a) For visually Handicapped
  - (b) For Hearing Impaired
  - (c) For orthopedically Handicapped
  - (d) Total
6. Pay and allowances
7. Place of work (name of town/village and district in which it is situated).
8. Probable date by which the vacancy will be filled.
9. Particulars regarding interview/test of applicants—
  - (a) Date of Interview/test.
  - (b) Time of Interview/test.
  - (c) Place of Interview/test.
  - (d) Designation and address of the person to whom the application should be sent and the applicants should report.
10. Whether there is any obligation or arrangement for giving preference to the persons with disabilities in filling up the vacancies, and if so, the number of vacancies to be filled by such persons.
11. Any other relevant information—
  - (2) The information shall be re-furnished to the appropriate Special Employment Exchange if there is any change in the particulars already furnished under sub-rule (1).

**45. Time limit for information of vacancies.**—(1) All Vacancies, which are required to be informed under rule 43, shall be informed at least 30 days before the date on which applicants will be interviewed or tested where interviews or tests are to be held, or the date on which vacancies are intended to be filled, if no interviews or tests are held.

(2) An employer shall furnish to the concerned Special Employment Exchange, the results of selection within 15 days from the date of selection.

**46. Submission of Returns.**—An employer shall furnish quarterly returns in Form-VI and biennial returns in Form -VII to the concerned Special Employment Exchanges. Quarterly returns shall be furnished within thirty days of the due dates, namely, 31<sup>st</sup> March, 30<sup>th</sup> June, 30<sup>th</sup> September and 31<sup>st</sup> December. Biennial return shall be furnished within thirty days of the due dates as notified in the official Gazette.

**47. Form in which record to be kept by an employer.**—An employer shall maintain the record of employees with disabilities in Form-VIII.

#### **CHAPTER - VI RECOGNITION OF INSTITUTIONS FOR PERSONS WITH DISABILITIES**

**48. Registration.**—(1) All Additional District Magistrate (Administration) within his jurisdiction, shall be the competent authority for the purpose of the Act.

(2) Every application for a certificate of registration as envisaged under section 52 of the Act shall be made in Form-IX to the competent authority.

(3) On receipt of an application, the competent authority, shall make enquiries to its satisfaction and if satisfied, it shall grant a certificate of registration to the applicant.

(4) State level record of registered institutions shall be maintained in the office of the Commissioner, Social Justice & Empowerment Department Government of Rajasthan. The competent authorities shall therefore send monthly information of

registered institutions to the office of the Commissioner, Social Justice & Empowerment Department.

**49. Order refusing to Grant the Certificate.**—The competent authority, may, if not satisfied, after giving the applicant reasonable opportunity of being heard, make an order refusing to grant a certificate. Such order shall contain specific reasons for refusal to grant such a certificate and shall be communicated to the applicant through registered post.

**50. Validity of Certificate of Registration.**—(1) A certificate of registration granted under section 52 shall, unless revoked under section 53, remain in force for a period as may be specified by the State Government from time to time.

(2) If satisfied, the competent authority may extend the period of registration for a further period of two years at a time, after realising the renewal fee of Rs.100.

**51. Appeal.**—Any person aggrieved by the order of the competent authority refusing to grant a certificate or revoking a certificate or refusing to renew the certificate may, within a period of 30 days, prefer an appeal to the State Government against such refusal or revocation:

Provided that the State Government may entertain an appeal after the expiry of the said period of 30 days if it is satisfied that there was sufficient cause for not filing it within the period of 30 days.

## CHAPTER - VII

### COMMISSIONER FOR PERSONS WITH DISABILITIES

**52. Procedure to be followed by Commissioner.**—(1) A complaint containing the following particulars shall be presented by the complainant in person or by his agent to the Commissioner or be sent by registered post addressed to the Commissioner :-

- (a) The name, description and the address of the complainant;
- (b) The name, description and the address of the opposite party or parties, as the case may be, so far as they can be ascertained;

- (c) The facts relating to complaint and when and where it arose;
- (d) Documents in support of the allegations contained in the complaint; and
- (e) The relief which the complainant claims.

(2) The Commissioner on receipt of a complaint shall refer a copy of the complaint to the opposite party/parties mentioned in the complaint directing him to give his version of the case within a period of 30 days or such reasonable period as may be granted by the Commissioner, depending on the nature of the matter.

(3) On the date of hearing or any other date to which hearing is adjourned, it shall be obligatory on the part of the parties or their agents to appear before the Commissioner. Where the complainant or his agent fails to appear before the Commissioner on such date, the Commissioner may in his discretion either dismiss the complaint on default or decide on merits.

(4) The Commissioner may on such terms as he deems fit and at any stage of the proceedings, adjourn the hearing of the complaint. But the complaint shall be decided, as far as possible, within a period of three months from the date of notice received by the opposite party.

(5) The Commissioner may also initiate suo-moto proceedings in the matters coming to his notice by any source whatsoever.

**53. Salary, Allowances and other terms and conditions of service of the Commissioner.**—Unless otherwise specified, the Commissioner for Persons with Disabilities shall be entitled to salary, allowances and all other perquisites as are available to the Principal Secretary to the State Government.

**54. Submission of Report to the State Government.**—The Commissioner shall submit a report, to the State Government on the implementation of the Act under clause (d) of section 61 at the interval of six months in such a manner that at least two reports are sent in one financial year.

**55. Submission of Annual Report.**—(1) The Commissioner shall, as soon as possible, after the end of the financial year but not later than the 30<sup>th</sup> day of September in the next year, prepare and submit to the State Government an annual report giving a complete account of his activities during the said financial year.

(2) In particular, the annual report referred to in sub-rule (1) shall contain information in respect of each of the following matters, namely:—

- (a) Names of officers of staff of the Commissioner and a chart showing the organizational set up.
- (b) The functions which the Commissioner has been empowered under section 61 and 62 and the highlights of the performance in this regard.
- (c) The main recommendations made by the Commissioner.
- (d) Progress made in the implementation of the Act, district wise.
- (e) Any other matter deemed appropriate for inclusion by the Commissioner or specified by the State Government from time to time.

#### CHAPTER - VIII MISCELLANEOUS

**56. Employment/Training.**—Disabled persons shall be given employment/training commensurate as per their ability.

**57. Removal of doubts.**—If any doubt arises relating to the application, interpretation and scope of these rules, it shall be referred to the Government in the Department of Social Justice & Empowerment, whose decision thereon shall be final.

**58. Repeal and saving.**—All orders, instructions and circulars in relation to matters covered by these rules and in force immediately before the commencement of these rules are hereby repealed:

Provided that any action taken under the orders, instructions and circulars, so repealed shall be deemed to have been taken under the provisions of these rules.

**Form-1****(See rule 3)****APPLICATION FOR OBTAINING DISABILITY  
CERTIFICATE BY PERSONS WITH DISABILITIES**

1. Name \_\_\_\_\_  
(Surname) (First Name) (Middle Name)
2. Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_
3. Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(Date) (Month) (Year)
4. Age at the time of application \_\_\_\_\_ years
5. Sex : Male / Female
6. Address :  

|                       |                                                      |
|-----------------------|------------------------------------------------------|
| (a) Permanent Address | (b) Current Address<br>(i.e. for Communication)      |
| .....                 | .....                                                |
| .....                 | (c) Period since when<br>residing at current address |
|                       | .....                                                |
7. Educational Status (Please tick as applicable)
  - (I) Post Graduate
  - (II) Graduate
  - (III) Diploma
  - (IV) Higher Secondary
  - (V) High School
  - (VI) Middle
  - (VII) Primary
  - (VIII) Illiterate
8. Occupation \_\_\_\_\_
9. Identification Marks (i) \_\_\_\_\_ (ii) \_\_\_\_\_
10. Nature of disability : Locomotor/Hearing/Visual/Mental/  
Others.
11. Period since when disabled : From Birth/Since Year \_\_\_\_\_



12. (i) Did you ever apply for issue of a disability certificate in the past --- YES / NO  
(ii) If Yes, details:  
(a) Authority to whom and district in which applied \_\_\_\_\_  
(b) Result of application \_\_\_\_\_
13. Have you ever been issued a disability certificate in the past?  
If Yes, please enclose a true copy.

**Declaration:**

I hereby declare that all particulars stated above are true to the best of my knowledge and belief, and no material information has been concealed or misstated. I further, state that if any inaccuracy is detected in the application, I shall be liable to forfeiture of any benefits derived and other action as per law.

\_\_\_\_\_  
(Signature or left thumb impression of person with disability, or of his/her legal guardian in case of persons with mental retardation, autism, cerebral palsy and multiple disabilities)

Date :

Place :

Encl:

1. Proof of residence (Please tick as applicable)
- (a) ration card,
  - (b) voter identity card,
  - (c) driving license,
  - (d) bank passbook
  - (e) PAN card,
  - (f) passport,
  - (g) telephone, electricity, water an any other utility bill indicating the address of the applicant,
  - (h) a certificate of residence issued by a Panchayat, Municipality, Cantonment Board, any Gazetted Officer, or the concerned Patwari or Head Master of a Government School,

77(26)

राजस्थान राज-पत्र, जुलाई 26, 2011

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- (i) in case of an inmate of a residential institution for persons with disabilities, destitute, mentally ill, etc., a certificate of residence from the head of such institution.

2. Two recent passport size photographs

(For office use only)

Date :

Place :

Signature of issuing authority

Stamp

**Form-II**

(See rule 4)

**Disability Certificate**

(In cases of amputation or complete permanent paralysis of limbs and in cases of blindness)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Recent PP size  
Attested  
Photograph  
(Showing face  
only) of the person  
with disability

Certificate No. \_\_\_\_\_ Date : \_\_\_\_\_

This is to certify that I have carefully examined Shri/ Smt./  
Kum. \_\_\_\_\_ son/wife/daughter  
of Shri \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
years, male/ female \_\_\_\_\_

(DD / MM / YY)

Registration No. \_\_\_\_\_ permanent resident of  
house No. \_\_\_\_\_ ward/ village/ street \_\_\_\_\_ post  
office \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_,

whose photograph is affixed above, and am satisfied that :

- (A) he/she is a case of
- locomotor disability

- blindness  
(Please tick as applicable)

(B) the diagnosis in his/her case is \_\_\_\_\_  
(A) He/She has \_\_\_\_\_ % (in figure) \_\_\_\_\_  
percent (in words) permanent physical impairment/ blindness  
in relation to his/ her \_\_\_\_\_ (part of body)  
as per guidelines (to be specified).

2. The applicant has submitted the following document as proof  
of residence :-

| <i>Nature of Document</i> | <i>Date of Issue</i> | <i>Details of authority<br/>issuing certificate</i> |
|---------------------------|----------------------|-----------------------------------------------------|
|                           |                      |                                                     |

(Signature and Seal of Authorized Signatory  
of Notified Medical Authority)

Signature/ Thumb  
impression of the  
person in whose  
favour disability  
certificate is issued.

**Form-III**

(See rule 4)

**Disability Certificate**

(In case of multiple disabilities)

**(NAME AND ADDRESS OF THE MEDICAL AUTHORITY  
ISSUING THE CERTIFICATE)**

Recent PP size  
Attested Photograph  
(Showing face only)  
of the person with  
disability

Certificate No. \_\_\_\_\_ Date : \_\_\_\_\_

This is to certify that we have carefully examined Shri/Smt./Kum.  
\_\_\_\_\_ son/wife/daughter of Shri \_\_\_\_\_

Date of Birth ..... Age ..... years, male/ female \_\_\_\_\_

(DD / MM / YY)

Registration No. \_\_\_\_\_ permanent resident of  
house No. \_\_\_\_\_ ward/ village/street \_\_\_\_\_ post  
office \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_,

whose photograph is affixed above, and are satisfied that :

(A) He/she is a Case of **Multiple Disability**. His/her extent of permanent physical impairment/disability has been evaluated as per guidelines (to be specified) for the disabilities ticked below, and shown against the relevant disability in the table below :

| S. No. | Disability           | Affected part of Body | Diagnosis | Permanent physical impairment/ mental disability (in %) |
|--------|----------------------|-----------------------|-----------|---------------------------------------------------------|
| 1.     | Locomotor disability | @                     |           |                                                         |
| 2.     | Low Vision           | #                     |           |                                                         |
| 3.     | Blindness            | <b>Both Eyes</b>      |           |                                                         |
| 4.     | Hearing impairment   | \$                    |           |                                                         |
| 5.     | Mental retardation   | x                     |           |                                                         |
| 6.     | Mental-illness       | x                     |           |                                                         |

(B) In the light of the above, his/ her over all permanent physical impairment as per guidelines (to be specified), is as follows :-

In figures:- \_\_\_\_\_ percent

In Words:- \_\_\_\_\_ percent

2. This condition is progressive/ non-progressive/ likely to improve/ not likely to improve.

3. Reassessment of disability is :

(i) not necessary,

OR

(ii) is recommended/after \_\_\_\_\_ years \_\_\_\_\_ months, and therefore this certificate shall be valid till

\_\_\_\_\_  
(DD)

\_\_\_\_\_  
(MM)

\_\_\_\_\_  
(YY)

@ e.g. Left/ Right/ both arms/ legs

# e.g. Single eye/ both eyes

\$ e.g. Left/ Right/ both ears

4. The applicant has submitted the following document as proof of residence:-

| <i>Nature of Document</i> | <i>Date of Issue</i> | <i>Details of authority issuing certificate</i> |
|---------------------------|----------------------|-------------------------------------------------|
|                           |                      |                                                 |

5. Signature and seal of the Medical Authority

|                                |                                |                                         |
|--------------------------------|--------------------------------|-----------------------------------------|
|                                |                                |                                         |
| <i>Name and seal of Member</i> | <i>Name and seal of Member</i> | <i>Name and seal of the Chairperson</i> |

Signature/ Thumb impression of the person in whose favour disability certificate is issued.

**Form-IV**

(See rule 4)

**Disability Certificate**

(In case other than those mentioned in Forms II and III)

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Recent PP size  
Attested Photograph  
(Showing face only)  
of the person with  
disability

Certificate No. \_\_\_\_\_ Date : \_\_\_\_\_

This is to certify that I have carefully examined Shri/Smt./  
Kum. \_\_\_\_\_ son/wife/daughter

of Shri \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ years,  
male/ female \_\_\_\_\_

(DD / MM / YY)

Registration No. \_\_\_\_\_ permanent resident  
of house No. \_\_\_\_\_ ward/ village/ street \_\_\_\_\_ post  
office \_\_\_\_\_ District \_\_\_\_\_ State \_\_\_\_\_, whose photograph  
is affixed above, and am satisfied that he/she is a case of \_\_\_\_\_  
disability. His/her extent of percentage physical impairment/  
disability has been evaluated as per guidelines (to be specified) and  
is shown against the relevant disability in the table below:-

| S.No. | Disability           | Affected part of Body | Diagnosis | Permanent physical impairment/ mental disability (in %) |
|-------|----------------------|-----------------------|-----------|---------------------------------------------------------|
| 1.    | Locomotor disability | @                     |           |                                                         |
| 2.    | Low Vision           | #                     |           |                                                         |
| 3.    | Blindness            | Both Eyes             |           |                                                         |
| 4.    | Hearing impairment   | \$                    |           |                                                         |
| 5.    | Mental retardation   | x                     |           |                                                         |
| 6.    | Mental-illness       | x                     |           |                                                         |

(Please strike out the disabilities which are not applicable.)

2. The above condition is progressive/ non-progressive / likely to improve/ not likely to improve.

3. Reassessment of disability is :

(i) not necessary,

OR

(ii) is recommended/ after \_\_\_\_\_ years \_\_\_\_\_  
months, and therefore this certificate shall be valid till

\_\_\_\_\_  
(DD) (MM) (YY)

@ e.g. Left/ Right/ both arms/ legs

# e.g. Single eye/ both eyes

\$ e.g. Left/ Right/ both ears

4. The applicant has submitted the following document as proof of residence :-

| <i>Nature of Document</i> | <i>Date of Issue</i> | <i>Details of authority issuing certificate</i> |
|---------------------------|----------------------|-------------------------------------------------|
|                           |                      |                                                 |

(Authorized Signatory of notified Medical Authority)  
(Name and Seal)

Counter signature  
{Countersigned and seal of the CMO/  
Medical Superintendent/Head of Government  
Hospital, in case the certificate is issued by a  
medical authority who is not a government  
servant (with seal)}

Signature/ Thumb  
impression of the  
person in whose  
favour disability  
certificate is issued.

Note : In case this certificate is issued by a medical authority who is not a government servant, it shall be valid only if countersigned by the Chief Medical Officer of the District.

**Form-V**  
(See rule 4)

**Intimation of Rejection of Application for Disability Certificate**

No. \_\_\_\_\_

Dated : \_\_\_\_\_

To,

(Name and address of applicant  
for Disability Certificate)

**Sub. : Rejection of Application for Disability Certificate.**

**Sir/ Madam,**

Please refer to your application dated \_\_\_\_\_ for  
issue of a Disability Certificate for the following disability:

\_\_\_\_\_

2. Pursuant to the above application, you have been examined by the undersigned/ Medical Board on \_\_\_\_\_, and I regret to inform that, for the reasons mentioned below, it is not possible to issue a disability certificate in your favour:
- (i)  
(ii)  
(iii)
3. In case you are aggrieved by the rejection of your application, you may represent to \_\_\_\_\_, requesting for review of this decision.

Yours faithfully,

(Authorized Signatory of the notified Medical Authority)

(Name and Seal)

**FORM - VI**

(See rule-46)

**(Quarterly return to be submitted once every quarter)**

1. Name and Address of the Employer .....
2. Nature of business/principal activity .....
3. For the quarter ending on .....
4. Employment details:
  - (a) Total number of persons with disability including working proprietors/ partners/ commission agents/ contingent paid and contractual workers, on the pay rolls of the establishment excluding part-time workers and apprentices. (The figures should include every person whose wage or salary is paid by the establishment).

|  |                                                                |                                                                    |
|--|----------------------------------------------------------------|--------------------------------------------------------------------|
|  | <i>On the last working<br/>day of the previous<br/>quarter</i> | <i>On the last working<br/>day of the quarter<br/>under report</i> |
|--|----------------------------------------------------------------|--------------------------------------------------------------------|

|                    |                           |                        |                           |                        |
|--------------------|---------------------------|------------------------|---------------------------|------------------------|
| <i>Particulars</i> | <i>Bl. &amp;<br/>L.V.</i> | <i>H.I. L.D. Total</i> | <i>Bl. &amp;<br/>L.V.</i> | <i>H.I. L.D. Total</i> |
|--------------------|---------------------------|------------------------|---------------------------|------------------------|

Men with disability



Women with  
disability  
Total

(**BI**- Blind; **L.V.**-Low vision, **H.I.**-Hearing Impairment  
**L.D.**- Locomotor Disability)

- (b) Reasons for any increase or decrease in employment if the increase or decrease is more than 5% during the quarter .....
5. **Vacancies** : (Vacancies carrying total emoluments as per prevailing minimum wages per month and of over three months duration.)
- (a) Number of vacancies occurred and informed during the quarter and the number filled during the quarter (separate figures may be given for men with disability and women with disability)

**Number of vacancies, which come within the purview of the Act**

| Categories | Occurred | Informed to        |                             | Filled | Sources<br>(describe the source from which filled) |
|------------|----------|--------------------|-----------------------------|--------|----------------------------------------------------|
|            |          | Spl. emp. exchange | General Employment Exchange |        |                                                    |
| 1          | 2        | 3                  | 4                           | 5      | 6                                                  |
| M.W.D.     |          |                    |                             |        |                                                    |
| W.W.D.     |          |                    |                             |        |                                                    |
| Total      |          |                    |                             |        |                                                    |

- (b) Reasons for not informing all vacancies occurred during the quarter under report vide 2(a) above .....

6. **Manpower Shortages: Vacancies/posts unfilled because of**

shortage of suitable applicants.

| S. No. | Name of the occupation or designation of the post | Unfilled    |      |      |       | Reasons for remaining unfilled |
|--------|---------------------------------------------------|-------------|------|------|-------|--------------------------------|
|        |                                                   | B.L. & L.V. | H.I. | L.D. | Total |                                |
| 1      | 2                                                 | 3           | 4    | 5    | 6     | 7                              |
| 1.     |                                                   |             |      |      |       |                                |
| 2.     |                                                   |             |      |      |       |                                |
| 3.     |                                                   |             |      |      |       |                                |
| 4.     |                                                   |             |      |      |       |                                |
| 5.     |                                                   |             |      |      |       |                                |

(Bl- Blind; L.V.-Low vision, H.I.-Hearing Impairment  
L.D.- Locomotor Disability)

Please list any other occupations for which this establishment had recently any difficulty in obtaining suitable applicants.

Signature of employer

Note : This return shall relate to quarters ending 31<sup>st</sup> March/  
30<sup>th</sup> June/30<sup>th</sup> September and 31<sup>st</sup> December.

### FORM - VII

(See rule-46)

(Biennial returns)

1. Name and address of the employer \_\_\_\_\_
2. Nature of business \_\_\_\_\_  
(describe what the establishment makes or does as its principal activity)
3. Return for the half year ending on-30-9-200\_\_ /31-3-200\_\_ .
4. Total number of persons with disabilities on the pay rolls of the establishment on 30<sup>th</sup> September, 200 /31<sup>st</sup> March, 200 (This figure should include every person whose wage or salary is paid by the establishment). (separate figures for men with disability and women with disability may be given.)

5. Occupational or designation wise or post wise classification of all employees as given in item - 1 above.

(Please give below the number of employees in each occupation separately)

| <b>Occupation</b>                                                                                                                                                                                                                                                                                                                                                        | <b>Number of employees</b>          |                                     |                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
|                                                                                                                                                                                                                                                                                                                                                                          | <b>Men with disability</b>          | <b>Women with Disability</b>        | <b>Total</b>                        |
| Use exact terms such as Principal, Reader, Assistant Professor, Lecturer, Headmaster, II-grade Teacher, L.D.C., U.D.C., Nurse, Driver, IV-Class, J.En, A.En., Ex.En, S.E., Additional Chief Engineer, Chief Engineer, Receptionist, Constabal, Accounts officer, District Social welfare Officer, HostalSuperintendent(Social welfare), Electrician, Carpenter etc. etc. | <i>Bl&amp; H.I. L.D. Total L.V.</i> | <i>Bl&amp; H.I. L.D. Total L.V.</i> | <i>Bl&amp; H.I. L.D. Total L.V.</i> |
| <b>Total:-</b>                                                                                                                                                                                                                                                                                                                                                           |                                     |                                     |                                     |

(Bl-Blind, L.V.-Low vision, H.I.-Hearing Impaired, L.D.-Locomotor Disabilities)

Signature of Employer

**FORM-VIII****(See rule-47)****(Record of the Employees)**

1. Name and address of the employer .....
2. Whether      Head Office .....
- Branch Office .....
3. Nature of business/principal activity .....
4. Total number of persons on the payroll of the establishment  
(This figures should include every person whose wage or salary is paid by the establishment) .....
5. Total number of disabled persons (disability-wise) on the payroll of the establishment (This figures should include every person with disability whose wage or salary is paid by the establishment) .....
6. (a) Occupational qualification of all employees as given in item-5 above  
(Please give below the number of employees in each occupation separately.)

**Occupation****Numbers of Employees****Men with  
Disability****Women with  
Disability**

**Use exact terms**    *Ortho- Visu- Hear Ortho- Visu- Hear- Total*  
*paedi- ally -ing paedi- ally ing*  
*caly caly*

Such as engineer  
(mechanical);  
teacher (domestic/  
science); officer on  
duty (actuary);

assistant director  
(Metallurgist);  
Scientific Assistant  
(chemist); Research  
Officer (economist);  
instructor (carpenter)  
Supervisor (tailor)  
fitter (internal  
Combustion engine);  
Inspector  
Total :-

(b) Please indicate the main reasons for any increase or decrease in employment if the increase or decrease is more than 5% during the quarter

.....

.....

7. **Vacancies :** Vacancies carrying total emoluments as per prevailing minimum wage per month and of over three months duration

(a) Number of vacancies occurred and notified during the quarter and the number filled during the quarter :-

| <i>Number of vacancies which come within the purview of the Act</i> |                                  |                                   |               |                                                |
|---------------------------------------------------------------------|----------------------------------|-----------------------------------|---------------|------------------------------------------------|
| <i>Occurred</i>                                                     | <i>Notified</i>                  |                                   | <i>Filled</i> | <i>Sources</i>                                 |
|                                                                     | <i>Local Employment Exchange</i> | <i>Special General Employment</i> |               | <i>(Describe the Source from which filled)</i> |
| <i>1</i>                                                            | <i>2</i>                         | <i>3</i>                          | <i>4</i>      | <i>5</i>                                       |

*Total :*

(b) Reasons for not notifying all vacancies occurred during the quarter under report vide (a) 2 above :-

.....

.....

.....

**8. Manpower Shortages :**

Vacancies/posts unfilled because of shortage of suitable applicants

| <i>Name of the<br/>occupation or<br/>designation of the<br/>posts</i> | <i>Number of unfilled vacancies / posts</i> |                                 |                                         |
|-----------------------------------------------------------------------|---------------------------------------------|---------------------------------|-----------------------------------------|
|                                                                       | <i>Essential<br/>Qualification</i>          | <i>Essential<br/>Experience</i> | <i>Experience<br/>Not<br/>Necessary</i> |
| <i>1</i>                                                              | <i>2</i>                                    | <i>3</i>                        | <i>4</i>                                |

Please list any other occupations for which this establishment had recently any difficulty in obtaining suitable applicants.

Signature of Employer

**FORM – IX**

(See rule-48)

**Application for Registration**

1. Name of the Applicant Organization :
2. Address, Phone Number, E-mail address and website:
3. Applicant is:
  - (a) An organization registered under the Societies Registration Act, 1986 (Central Act No. XXXI of 1860):
  - (b) An Organization Registered under the Rajasthan Societies Registration Act, 1958 (Act No. 28 of 1958)
  - (c) A public Trust registered under any Law for the time being in force:
  - (d) Indian Red Cross Society or its branches:
  - (e) Company registered under Section 25 of the Companies Act, 1956:

- (f) Any other organization (details of registration with the name of the Act) which may be recognized by the Ministry for the purpose of this Scheme (Details of registration with the name of the Act):
4. Date of establishment of the Organization :
  5. Nature of the organization. (Please indicate precisely whether it is educational or training institution or a workshop for the blind, the deaf and dumb, the orthopaedically handicapped or mentally retarded persons, etc.):
  6. Brief history of the organization and of its objects and activities:
  7. Whether the organization is of an All India Character. If so, give the nature of its All India activities:
  8. Whether located in its own/rented building:
  9. Name, address, phone number, mobile number & qualification's and E-mail address of specially trained staff members:
  10. List of papers/statements to be attached:
    - (a) Prospectus or a brief descriptive note giving aims and objects/activities of the Organization.
    - (b) Constitution of the Organization.
    - (c) Constitution of the Board of Management with particulars (Name, address, phone number etc.) of each Member.
    - (d) Latest available annual report;
    - (e) Income and Expenditure accounts, and Receipt and Payment accounts duly audited by a Chartered Accountant or a Government auditor for the last two years for the Organization as a whole (along with a copy of the certified balance sheet from the previous financial year for the Organization as a

whole); **(This is not necessary in case of a new or less than two year old institution/organization)**

- (f) A statement giving details (year, purpose, amounts, etc) of assistance received during the last five years from the Censdtral/State Government, Central Social Welfare Board, Local Bodies or any other quasi-Government institution including requests made thereof to any one of those or any other Organization or any foreign agency.
- (g) A copy each of the plan of the proposed building (rough sketch giving broad indication of the building to be constructed and area to be covered) and estimated cost of construction; and
- (h) A statement indicating the equipments, apparatus, furniture, library books, etc (by number of details whichever is possible) already available; and separately a statement indicating the above items purchased year-wise with financial assistance from the Ministry of Welfare; and
- (i) Details budget estimated of the Organization as a whose exhibiting the estimated receipts and expenditure during the year for which grant sought for

11. List of additional Information or paper, if any ;

(Signature of the authorized person  
of the institution/organization)

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**By order of the Governor**

अदिति मेहता,

**Principal Secretary to Government of Rajasthan.**

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**Government Central Press, Jaipur.**