APPLICATION FORM FOR

PENSION SCHEME OF PERSON WITH DISABILITIES UNDER CMST

1 Passport Photo (colour)

Father's/Mother's/Legal Guardian's name: Address: District: Di	1.	Name of the person with disability: (in block letters)														AL I	88	S.									
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Have you availed Care Giver Allowance under CMST: Yes □/No □ (✓tick only) Have you availed any other benefit from other similar schemes under Social Welfare Department or any other Department under State or Central Govt. Yes/No (✓tick only) If yes (for Sl. No. 7 and 8) please give the details: Bank details: Name of Account Holder: Name of Bank Branch: Negative FSC No. Contact No. Contact No. Declaration I hereby declare that all the statements mentioned above are true, correct and complete to the best firmy knowledge and belief. I understand that in the event of any information being found false or incorrect and the content of the statements and conditions given by the Department. Pated: Signature of Applicant/Father/Mother/Legal Guardian Received an application for Pension Scheme of Persons with Disabilities under CMST along	6.																					,					
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General Information for Applicants

- 1. Eligibility criteria for availing Pension Scheme of Persons with Disabilities under CMST.
 - Person with Disability should be a domicile of the State and should possess disability certificate issued by competent authority.
 - ii. The Disability Certificate means the certificate issued under UDID Project.
 - iii. The Disability Certificates issued earlier in the State in manual format are not allowed for this scheme.
 - iv. Person with disabilities having degree of disability as specified in Para V are eligible for this scheme.
 - The following types of disabilities having degree of disabilities shown against each type are eligible for Chief Minister's Disability Pension Scheme (CMDPS).

SI. No.	Type of disability	Eligible degree of disability	Remarks
1.	Locomotor Disability	60% and above	
2.	Leprosy Cured	60% and above	ET SESSION.
3.	Cerebral Palsy	60% and above	
4.	Dwarfism	60% and above	
5.	Muscular Dystrophy	60% and above	
6.	Acid Attack	60% and above	
7.	Blindness	60% and above	
8.	Low Vision	60% and above	
9.	Deaf	60% and above	
10.	Hard of Hearing	60% and above	MANUAL PROPERTY OF THE
	Speech and Language Disability	60% and above	Colonia Consulation
12.	Specific Learning Disability	60% and above	
13.	Mental Behaviour i.Obsessive Compulsory Disorder (OCD) ii.Bipolar Disorder iii.Chronic Schizophrenia iv.Dementia		ovi adsammo, citur A bálisvé uov evett Setrolisvé uov evett Outrosoft settre vote
14.	Multiple Sclerosis	60% and above	
15.		60% and above	Capacitation call
16.	Thalassemia	60% and above	Confederals Las
17.	Sickle Cell Disease	60% and above	

- vi. The bank account must be preferably in the name of person with disability.
- vii. If the person with disability/applicant is not in a position to operate the account, a joint account opened with the person with disability will be accepted.
- viii. In case of joint account, operated other than parent, the joint account holder must be a person authorized by any elected persons (concerned ward Member, Pradhan, Zila Parishad, Counsellor, Secretary/President of Local Club etc. or a Gazetted Officer.
 - ix. Persons with Disabilities availing Care Giver Allowance/Maintenance Grant to Persons with Disabilities with High Support Needs under CMST or benefits under any scheme from any source or any kind of similar scheme will not be eligible under this scheme.
 - x. Income of the parents should be less than Rs. 4.00 lakhs per annum from all sources.

2. Documents to be enclosed:

- i. Photocopy of UDID Certificate/Card.
- ii. One Passport photograph of person with disability.
- iii. Domicile Certificate issued by Competent Authority/Residential Certificate issued by any Gazetted Officer.
- iv. Photocopy of Bank Passbook.
- v. Photocopy of Aadhaar Card of the person with disability.
- vi. If the Bank account is operated by the person authorized by the elected person or Secretary/President of local club or a Gazetted Officer, a copy of Aadhaar Card/PAN card etc. of the signatory should be enclosed.
- vii. Income Certificate issued by a Gazetted Officer.