

#### K.\$.N GOVT. DEGREE COLLEGE FOR WOMEN

(ISO 9001:2015, ISO 14001:2015, ISO 50001:2011 CERTIFIED COLLEGE)

(Re-accredited by NAAC with \*B\* Grade)

Behind RTO Office, Bhairava Nagar, Anantapuramu-515002

(Affiliated to SK University, Anantapuramu)



#### **Facilities for Divyangjnan**







## Ramps at Main Building, Science Block & Hostel







## Available Wash Room for Divyangan Students





## Available Ramp for Divyangjan Students







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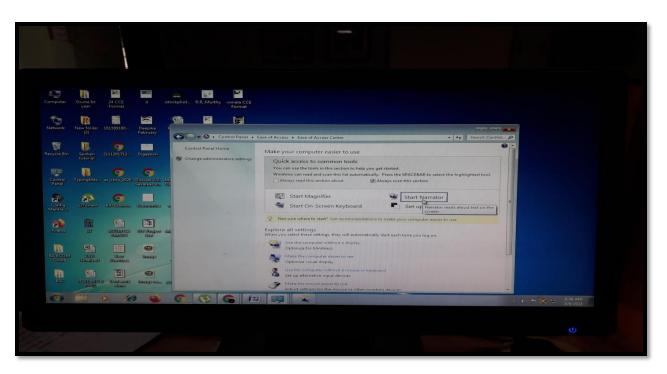


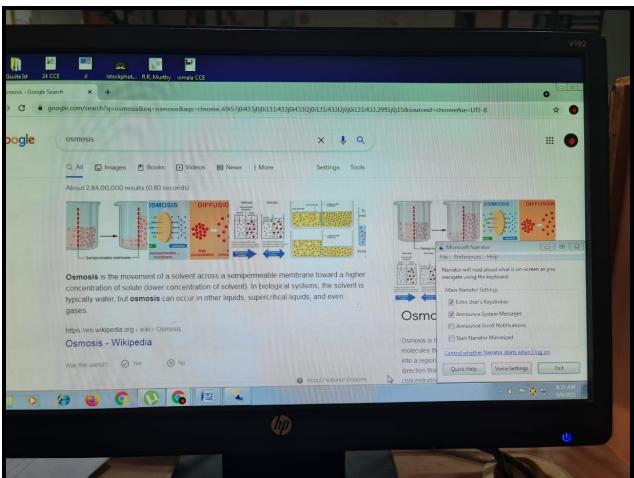


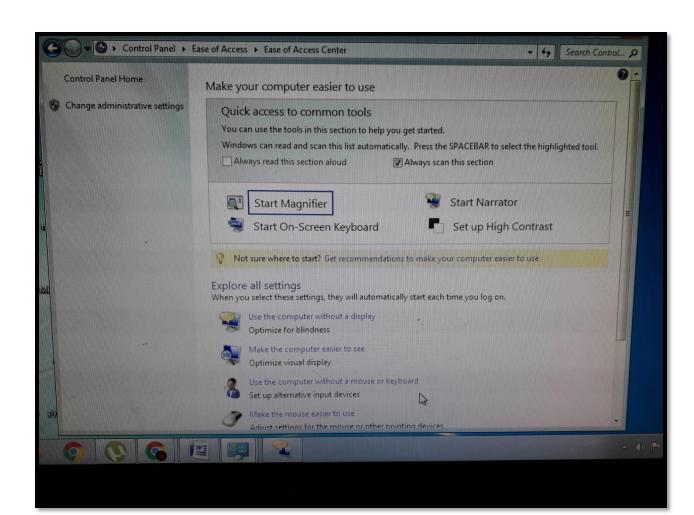


### Screen Reader Softwares using for Divyangjnan

- Non-Visual Desktop Access(NVDA) http://www.nvda.project.org/
- 2. System Access To Go <a href="http://www.satogo.com">http://www.satogo.com</a>
- 3. Microsoft Narrator







### SRI KRISHNADEVARAYA UNIVERSITY:: ANANTHAPURAMU



SI. No. :

005731

Reg. No.:

170033122



Andhar

PROVISIONAL CERTIFICATE

This is to certify that Mr. /Ms. Gandi Sai Rishitha

D/o Gondi.nagesh

with Reg. No. 170033122 has qualified himself/herself for the Degree of Bachelor of

ARTS in this University. he/she having been declared to have passed the Examination prescribed therefor as follows, that he/she has done all that is necessary for the formal presentation of Degree of

#### **Bachelor of Arts**

Month and Year of Passing	Courses	Cumulative Grade Point Average (CGPA)	Letter Grade
NOVEMBER - 2017	Part - I : Languages : English	7.52	B+
NOVEMBER - 2019	Part - II :Core Subjects / Electives HISTORY ECONOMICS COMPUTER SCIENCE Cluster Elective : COMPUTER SCIENCE	6.88	В
APRIL - 2018	Part - III : Foundation Courses	6.98	В

The Medium of Instruction: ENGLISH

ANANTHAPURAMU - 515 003, A.P., INDIA

Dated: 16-07-2020

Supdt,

ASSISTANT REGISTRAR

any discrepancy in the entries or between the results published and the marks noted above must be brought to the notice of the Director of Evaluation IMMEDIATELY.

# Nizam's Institute of Medical Sciences PUNJAGUTTA, HYDERABAD-500 082. A.P.

Medical Certificate in respect of an Orthopaedically	Handicapped Candidate
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M. R. D. No. 01-90301477 O. P. No - 90301477

fierence with normal functioning of bones, and muscles and joints.

The orthopaedically handicapped are those who have defect of deformity which causes on inter-

1. Name of the Candidate

2. Identification marks

4. Father's Name

5. Approximate age

(a) Nature of disability (Tick relevant from the following) Post Polio Paralysis, Hemiplegia, Quadreplegia, Malunited Fracture Nerve Paralysis, Upper extremety Loser extremity, Deformity, Limp Painful Shortening, Congenital, Acquired. Above Knee, Below knee, Hip. First Fingeres, Demipervectomy Elbow, Symes, Chooparts, Below Elbow. Above Elbow, Shoulders, Fore Quarter, Unilatcral, Bilateral.

(b) Extent of Disability Estimate in percentage (MC Brige's Scale) On Anatomical Functional (Patient's Assesment Examinar's Assesment) Economical Basis Mention As percentages (Below 25, 25 to 75, 75 to 99 Total Disability)

(c) Use of appliance (tick relevant from following list)
Calipers, Crutch, Above Knee, Below Knee
Prostoesis, Cans, Unilateral, Biliatral, Above Sholders, Disarticulation.

(d) Any operation done of indicated : (e) Photograph (Attested) : to whome the nature of disability and any app-

7. Any other particulars to clearity the nature and extent of disability that the Surgeon might like to point out.

: A mode on @hand index finger.

FEMALE

DIO. STI. G. NAGESH

16 years.

Cerebral Palsy Spashic Triplegia

#### PARMANENT PARTIAL

Signature of the Candidate :

Place : HYDERABAD.

DATE: 05/05/2014

SIGNATURE OF ORTHOPAEDIC SURGEON

Dr. A.K. PUROHIT Senior Prof. & HOD Department of Neurosurgery Nizam's Institute of Medical Sciences, Punjagutta, Hydrabad-500 082.

