



**CENTRAL POLLUTION CONTROL BOARD,
PARIVESH BHAWAN
DELHI-110 032**

No. C-22017/4/2009/Admn.(P) *2018*

the 27th Oct., 2016

CIRCULAR

**Sub: Nomination for National Awards for the empowerment
of Persons with Disabilities, 2016 - reg.**

Ministry of Social Justice and Empowerment, Deptt. of Empowerment of Persons with Disabilities (Divyangjan) has been implementing the Scheme of National Awards for the Empowerment of Persons with Disabilities. The Award shall be conferred on the occasion of the International Day of Disabled Persons i.e. on 3rd December, 2016 in the following categories:

- i) Best individual and institution working for the case of persons with disabilities;
- ii) Outstanding work in the Creation of Barrier-free Environment for the persons with disabilities.

Applications will be initially short-listed and selection of recipients of awards will be made by various Screening Committees and a National Selection Commission Committee respectively. Selected recipients of awards will be reimbursed upto 1st Class or AC-II Tier to and fro train fare from their place of residence for receiving the award in New Delhi. Lodging and Boarding arrangements will also be made during their stay in Delhi for receiving the awards by the Ministry of Social Justice and Empowerment.

All the Divisional Heads/Zonal Incharges are requested to recommend the names of persons with disabilities for the awards, complete in all respects in the prescribed proforma duly accompanied with two recent passport size photographs). The recommendation may be forwarded to Admn.(P) latest by 10.11.2016 positively for onward submission to the Ministry.

(R.D. Pandey)
Administrative Officer

ANNEXURE-A

**PARTICULARS OF RECOMMENDED EMPLOYEE/SELF-EMPLOYED WITH DISABILITIES
FOR NATIONAL AWARD**

1.	Name: (a) in English (in BLOCK Capital letters)	
	(b) in Hindi	
2.	Address: (a) Residential	
	(b) Office	
3.	Telephone numbers: (a) Residential	
	(b) Office	
4.	FAX Number: (a) Residential	
	(b) Office	
5.	E-mail address, if any	
6.	Sex	
7.	Date of Birth/Age	
8.	Nature/Category of disability	
9.	Percentage of disability(Certificate of competent authority to be attached)	
10.	Qualification: (a) Academic	
	(b) Technical	
	Qualifications acquired after onset of disability should be clearly indicated. (Certificate and testimonial should be attached)	
11.	Trainings received, if any:	
	(a) Name of the Institution/Organisation	
	(b) Name of the Course	
	(c) Duration of the course	
12.	Details of experience gained informally	
13.	Whether employee or self-employed	
14.	If employee :	
	(a) Name of the Employer	
	(b) Designation or Post held	
	(b) Scale of pay and salary drawn	
	(c) Nature of work engaged on	
	(d) How does his/her productivity compare to that of his non-disabled counterparts in percentage of 10% more or less.	
	(e) Relations with fellow-employees	
	(f) Independence in work(encircle the grading option)	Very Good Good Poor
	(g) Mobility and self care remarks including a brief life sketch of about 200 words of the candidate highlighting his struggle against the disadvantage created by his disability (encircle the grading option)	Very Good Good Poor
	(h) Punctuality and regularity in attendance(encircle the grading option)	Very Good Good Poor
	(i) Whether any incentive/reward/ certificate given to the employee by the employer for his work during last three years. If yes, details thereof	
	(j) General assessment of the employee for last three years(encircle the grading option)	Very Good Good Poor
15.	If self-employed :	
	(a) Trade/Profession with which associated	
	(b) Monthly Income(Attach copy of last Income Tax Return filed/Income Certificate)	

	(c) How far you have upgraded your skill in that trade/profession with a view to absorb yourself fully as a self-employed entrepreneur?	
	(d) Socio-economic problems/ constraints being faced in the existing trade/profession to become a sustainable self-employed entrepreneur	
	(e) (i) Whether taken loan from any bank/financial institution of State/ Central Government(give full details)	
	(ii) If yes, indicate the balance amount of loan to be repaid	
	(f) Have you ever been declared to be a defaulter to any nationalised bank/ financial institution/cooperative bank	
16.	If any National or State level Award received during last five years, then please mention: (a) Name of the Award (b) Conferring Agency (c) Year of conferment	

NOTE

1. In case of self-employed persons with disabilities, the particulars may be duly certified by a Gazetted Officer of the Central/State Govt./Member of Parliament/Member of State Legislature/Municipal Councilor of Municipal Corp. etc.
2. Three copies of the photographs clearly showing disability of recommended employees/self-employed with disabilities, with bio-data be enclosed.
3. Application should be supported by a Medical certificate indicating the degree of total disability.