



## CERTIFICATE FOR AADHAAR ENROLMENT OF DESTITUTE PERSON WITH DISABILITY, ABOVE 18 YEARS OF AGE

**Instructions:** All details to be filled in Block Letters

(To be valid for 3 months from date of issue)

To be printed on plain A4 paper size;

Not required to be printed on letter head;

**Note:** To be used as Proof of Identity (PoI) and Proof of Address (PoA) only in the case of destitutes above 18 years with disability.

DD MM YY YY YY

### INDIVIDUAL SEEKING TO ENROL DETAILS

**Full Name:**

**House No./ Bldg./ Apt:**

**Street/ Road/ Lane:**

**Landmark:**

**Area/ Locality/ Sector:**

**Village/ Town/ City:**

**Post Office:**

**District:**

**State:**

**PIN Code:**

Signature/ Thumb/ Finger Impression of  
Individual Seeking to Enrol

**Date of Birth:**  
(Declared/Estimated)

  

Individual Seeking to Enrol  
Recent Colour Passport-Size  
Photograph.

Cross Signed and  
Cross Stamped  
by District Social Welfare Officer/  
Equivalent rank Officer

**NB:** DO NOT  
OVERLAP WITH  
TEXT BOXES.

### CERTIFIER'S DETAILS (TO BE FILLED BY THE HEAD OF THE SHELTER HOME)

**Name of the Initiator:**

**Designation:**

**Office Address:**

**Contact Number:**

Signature & Stamp of the  
Head of the Shelter Home

**CHECKLIST  
FOR CERTIFIER**  No overwriting  Issue date is filled  Resident's signature  Certifier's details  
 Resident's Photo is cross signed and cross stamped (paper to photo or photo to paper)

### CERTIFIER'S DETAILS (TO BE FILLED BY DISTRICT SOCIAL WELFARE OFFICER/ EQUIVALENT RANK OFFICER)

**Name of the Certifier:**

**Designation:**

**Office Address:**

**Contact Number:**

Signature & Stamp of the District Social Welfare Officer/  
Equivalent rank Officer

We jointly certify the credentials of the person stated above and that the person is eligible for obtaining Aadhaar as per section 2(v) and 3 of The Aadhaar (Targeted Delivery of Financial and Other Subsidies, Benefits and Services) Act, 2016