

**FORMAT OF TEST - CHECK REPORT Under ADIP Scheme**

Test Check (Minimum of 10/15 percent%) of beneficiaries assisted during the year 2018-19

Name of the Implementing Agency : NIEPID, Secunderabad

**Part - 1**

Sl. No.	S.No.of List of the covered beneficiaries	Name of Beneficiaries	Gender	Age	Father/Husband name	Complete Address	Contact Numbers	Place of camp	Type of Aid Given (TLM)	Date of Camp	Whether any surgical correction undertaken	Date of test check	Findings of test check (eg.distributed confirmed and working well/distribution confirmed but quality not satisfactory/distribution not confirmed, etc.)
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	1	D. Gracy	F	9	D. Srinu	Plot No.-57, Amarjyothi Colony, New Bowenpally, Sec-bad, Telangana - 500 039.	9652590033	NIEPID (Auditorium)	Kit - 3	22.02.2019	No	22.02.2019	Working well / Distribution confirmed
2	2	K. Neelesh	M	6	K. Manoj Kumar	H.No.8-7-171/80, Laxmi Narsimha colony, Old Bowenpally, Tirumalagiri, Hyd-bad - 500 011	9177838303	NIEPID (Auditorium)	Kit - 2	22.02.2019	No	22.02.2019	Working well / Distribution confirmed
3	3	Neha Parveen	F	16	Shaik Jakeer Ali	H.No.4-42-502, Asbestos Colony, Jagadgirigutta, Balanagar - 500 037	9666310906	NIEPID (Auditorium)	Kit - 4	22.02.2019	No	22.02.2019	Working well / Distribution confirmed

\* 15% in case of grants-in-aid up to Rs.10.00 lakh and 10% in case of grant- in aid exceeding Rs.10.00 lakh



( Signature )

Doctor of primary Health Centre/Block/Tehsil or Tehsildar of Nayab Tehsildar or SDO or BDO/SDO level officer or Social Welfare Officer/District Disability Officer Women and Child Development Officer holding charge of Social Welfare or any other officer authorised by District Collector  
Authorised officer from any other NIs

**E. EDDY THOMAS**  
Officer-in-Charge  
National Institute for The Empowerment of  
Persons with Visual Disabilities  
Department of Disability Affairs  
Ministry of Social Justice and Empowerment, Govt. of India.  
Niepid Campus, Hasmathpet Road, Manovikas Nagar,  
Bowenpally, Secunderabad - 500 009.

PART - II

ABSTRACT OF TEST CHECK

Total No. of beneficiaries Test checked	No. of beneficiaries found with aid/appliances		No. of beneficiaries not found to have been given aid/appliances
	Working satisfactory	Not working satisfactory	
1	2	3	4
3	3	0	0

Certificied that the above report is based on test check personally carried out by me and the finding have been accurately reported above.



( Signature )

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or SDO or BDO/SDO level officer or Social Welfare Officer/District Disability Officer  
Women and Child Development Officer holding charge of Social Welfare  
or any other officer authorised by District Collector  
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