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

SI. No.	S.No.of List of the covered benefici aries	Name of Beneficiaries	Gen der	Age	Father/ Husband name	Complete Address	Contact Numbers	Place of camp	Type of Aid Given (TLM)	Date of Camp	Whehte r any surgical correcti on underta ken	Date of test check	Findings of test check (eg.distributed confirmed and working well/distribution confirmed but quality not satisfactory/distribu tion not confirmed, etc.)
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1	1	B. Dikshitha	F		B. Prabhakar Prabhu	H.No. 3-18-P 12, Peddakamela, Tirumalagiri, Secunderabad	9989935033	NIEPID (Ground)	Kit - 2	28.01.2019	No	28.01.2019	Working well / Distribution confirmed
2	2	Y. Sai Krishna	М	18 Yrs.	Late Y. Srinivas	H.No.1-32/1, Kaasulamma meda, Atchutapuram, East Godavari,	9491317655	NIEPID (Ground)	Kit - 4	28.01.2019	No	28.01.2019	Working well / Distribution confirmed
3	3	G. Mamath	М	11 Yrs.	G. Issak	H.No.3-20C, Harijanawada, Devaram Padu, Prakasam, Andhra Pradesh - 523182	7207107315	NIEPID (Ground)	Kit-1	28.01.2019	No	28.01.2019	Working well / Distribution confirmed

<sup>\* 15%</sup> 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)2/9

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

Reeder & Vc Assistant Director

Ali Yavar Jurg National Institute of Speech and Hearing Disabilities (Divyangjan)

Regional Centre, Manovikas Nagar, Secunderabed - 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 personaly carried out by me and the finding have been accurately reported above.

(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 (Diyangan)

Women and Child Development Officer holding charge of Social Welfare 6 - 500 000.

or any other officer authorised by District Collector