



“ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षण प्रसार” - शिक्षणमहर्षी डॉ.बापूजी साळुंखे

Shri Swami Vivekanand Shikshan Sanstha, Kolhapur's

KAKASAHEB CHAVAN COLLEGE,

Talmavale, Tal. Patan, Dist. Satara



Affiliated to Shivaji University, Kolhapur

NAAC

4th Cycle

Assessment and Accreditation Process

Criterion VII

Institutional Values and Best Practices

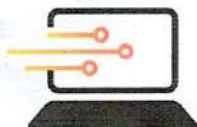
Key Indicator - 7.1

**Institutional Values and Social
Responsibilities**

QnM 7.1.2

7.1.2 The institution has facilities and initiatives for

- 1. Alternate sources of energy and energy conservation measures**
- 2. Management of the various types of degradable and non-degradable waste**
- 3. Water conservation**
- 4. Green campus initiatives**
- 5. Disabled-friendly, barrier free environment**



Patil Computer & multibrand store

438, Silver Land, Near IDBI Bank, Opp. Anu Agencies, Shaniwar Peth, Karad 415110.

Ref. No.

Date :

Memorandum of Understanding

Agreement for Disposal of E-waste:

This Memorandum of Understanding for disposal of E-waste is made at Talmavle on 18th December, 2018 between **Kakasaheb Chavan College, Talmavale, Tal: Patan, Dist: Satara** and **Patil Computer and Multibrand Store, Karad**, a company registered under the Companies Act, 1956 and governed under Companies Act 2013 having its registered office at **438, Silver Land, Near IDBI Bank, Opp. Anu Agencies, Shaniwar Peth, Karad 415110** (hereinafter referred to as 'the Vendor') of the one Part and **Kakasaheb Chavan College, Talmavle, Tal & Dist: Satara**.

Whereas:

1. The College is engaged in providing education to students and generates E-wastes such as Desk tops, Servers, Laptops, Printers, Keyboards, Mouse, UPS, Scanners, Biometric Machine, and LCD Projectors etc. while carrying out different educational and office activities and intends to dispose the said E-waste generated as per the guidelines of the Central Pollution Control Board, Ministry of Environment and Forests.
2. The College has agreed to appoint the Vendor and the Vendor has agreed to take charge of the said E-waste and collect, remove and dispose the same in the manner prescribed by the concerned authorities on the following terms and conditions agreed to between the parties.

Scope of Services:

- The College agrees to provide E-waste and the Vendor agrees to take charge of the E-waste.



- The College shall send written intimation to the Vendor in order to collect the E-waste. The said E-waste shall be collected from the College premises by the Vendor.
- The Parties hereby agree that the ownership and risk of loss of the said E-waste will transfer from College to Vendor upon delivery of the same to Vendor in the College Premises.
- The vendor hereby agrees that it shall pick material from College Premises as per the shared list by College without any cost and shall ensure that proper documentation of the same is done as required under the applicable laws/rules/regulations.

▪ **Term:**

The duration of the Agreement shall be 5 years from the date hereof, unless it is terminated earlier as hereinafter provided. On the expiry of the said period, the Agreement shall stand terminated and may be renewed by the Parties with mutual consent at any time during the pendency of the agreement or even alter.

This MoU shall be executed by the Parties through a duly authorized representative and shall be effective as at the data of last signing.

**For Kakasaheb Chavan College, Talmavale
Tal Patan, Dist: Satara**

Signed:


PRINCIPAL
KAKASAHEB CHAVAN COLLEGE
TALMAVALE, TAL-PATAN, DIST-SATARA

Name: Dr. A. R. Gade

Designation: Principal

Date: 18/12/2018

College Seal



**Patil Computer and Multibrand Store,
Karad Dist: Satara**

Signed:



Name: Mr. Kishor Karpe

Designation: Proprietor

Date: 18/12/2018

Vendor Seal





Estd. 1962
"A++" Accredited by
NAAC(2021)
With CGPA 3.52

SHIVAJI UNIVERSITY, KOLHAPUR - 416 004,
MAHARASHTRA

PHONE : EPABX - 2609000. Special Cell- (0231) 2609148
Website - www.unishivaji.ac.in E-mail- spcell@unishivaji.ac.in

शिवाजी विद्यापीठ, कोल्हापूर - ४१६ ००४, महाराष्ट्र
विशेष कक्ष

दूरध्वनी - ईपीएबीएक्स - २६०९००००, विशेष कक्ष - (०२३१)२६०९१४८
वेबसाईट- www.unishivaji.ac.in, ई-मेल - spcell@unishivaji.ac.in



जा.क्र.शिवाजी विद्यापीठ/विशेष कक्ष/२०२२-२३/९९७

दिनांक : ०१ NOV 2022

प्रति,

मा.प्राचार्य/संचालक,

सर्व संलग्न महाविद्यालये/संस्था,

शिवाजी विद्यापीठ, कोल्हापूर

विषय:- अपंग व्यक्तींसाठी राखीव ठेवलेल्या पदांच्या यादीमध्ये मणक्याचे विकृती व मनक्याला दुखापत असलेल्या व्यक्तींचा समावेश करणेबाबत..

संदर्भ:- विद्यापीठ अनुदान आयोगाचे No. F.6-8/2022(SCT/DEPwD/Divyanjan),
Date - 14/10/2022 रोजीचे पत्र.

महोदय,

उपरोक्त संदर्भित विषयानुसरून आपणास आदेशान्वये कळविणेत येते की, मा. सहसचिव, विश्वविद्यालय अनुदान आयोग, नवी दिल्ली यांच्या सोबत जोडलेल्या पत्रामध्ये नमूद केल्यानुसार आपल्या महाविद्यालय/संस्था स्तरावर कार्यवाही करण्यात यावी.

कळावे,

प्रा. शिसे
पत्रकारिका

सोबत:- वरीलप्रमाणे.

२०११

आपला विश्वासू,

Pspando

उपकुलसचिव

संयुक्तसचिव

विशेष कक्ष

शिवाजी विद्यापीठ, कोल्हापूर





विश्वविद्यालय अनुदान आयोग
University Grants Commission

(शिक्षा मंत्रालय, भारत सरकार)
(Ministry of Education, Govt. of India)

35, फिरोज शाह मार्ग, नई दिल्ली-110001
35 Feroz Shah Marg, New Delhi-110001



No. F. 6-8/2022 (SCT/DEPwD/Divyanjan)

All The Vice Chancellors

(CU/DU/State Universities/Private Universities)

Subject: Inclusion of a person with a spine deformity and spine injury in the list of posts identified to be reserved for persons with benchmark disabilities – amendment to the notification dated 04.01.2021 issued by DEPwD – reg.

Sir,

The undersigned is directed to refer to the Office Memorandum No. 30-12/2020- DD III dated 07.09.2022 issued from the Deputy Secretary to the Govt. of India, Ministry of Social Justice and Empowerment DEPwD (Divyangjan), 5th Floor, Antyodaya Bhavan, CGO Complex, Lodhi Road, New Delhi regarding the list of posts identified to be reserved for various categories of persons with benchmark disabilities notified on 04.01.2021 and to say that Spine Injury (SI)/Spine Deformity (SD) was not clearly indicted in the said list. The Hon'ble High Court of Delhi in its order dated 18.04.2022 directed to elaborate the various categories under which persons with different disabilities could apply in recruitment for government posts.

In compliance with the said directions, DEPwD has issued a notification on 29.08.2022 amending the earlier notification dated 04.01.2022 to clarify directions in this regard. Persons with spine injury/spine deformity can be classified into the following two categories:

1. Persons with SD/SI without any associated neurological/limb dysfunction and
2. Persons with SD/SI with associated neurological/limb dysfunction.

it has now mandated that a separate sub category i.e. Spinal Deformity (SD) and Spinal Injury (SI) without any associated neurological/limb dysfunction shall be incorporated under Locomotors Disability in addition to OA, OL, BA, BL, OAL, BLOA, and BLA. Thus, all the posts identified in the list stand identified suitable for persons with SD/SI without neurological/limb dysfunction.

F.No. 30-12/2020-DD-III
 Government of India
 Ministry of Social Justice and Empowerment
 Department of Empowerment of Persons with Disabilities (Divyangjan)
 5th Floor, Antyodaya Bhavan, CGO Complex, Lodhi Road, New Delhi

Dated: 07.09.2022

OFFICE MEMORANDUM

Subject: Inclusion of persons with spine deformity/spine injury in the list of posts identified to be reserved for persons with benchmark disabilities - amendment to the notification dated 04.01.2021 issued by DEPwD - regarding

The undersigned is directed to refer to this Department's OM No. 38-16/2020 dated 20.01.2021 regarding the list of posts identified to be reserved for various categories of persons with benchmark disabilities notified on 04.01.2021 and to say that Spine Injury (SI)/Spine Deformity (SD) was not clearly indicated in the said list. Hon'ble High Court of Delhi in its order dated 18.04.2022 directed this Ministry to elaborate the various categories under which persons with different disabilities could apply in recruitment of government posts.

2. In compliance of the said directions, the Department has issued a notification on 29.08.2022 (copy enclosed) amending the earlier notification dated 04.01.2022 to clarify the position in this regard. Persons with spine injury/spine deformity can be classified into the following two categories:

(i) persons with SD/SI without any associated neurological/limb dysfunction and

(ii) persons with SD/SI with associated neurological/limb dysfunction

3. As per the notification dated 29.08.2022, it has now been mandated that a separate sub category i.e. **Spinal Deformity (SD) and Spinal Injury (SI) without any associated neurological/limb dysfunction** shall be incorporated under Locomotor Disability in addition to OA, OL, BA, BL, OAL, BLOA and BLA. Thus, all the posts identified in the list stands identified suitable for persons with **SD/SI without neurological/limb dysfunction**.

Persons with SD/SI with associated limb dysfunction shall be covered under the respective sub category such as OA, OL, BA, BL, OAL, BLOA and BLA, as the case may be. For example, if a post is identified suitable for OA and OL, the post is also to be suitable for persons with SD/SI with associated limb dysfunction of OL/OA.

4. All Central Ministries/Departments are requested to adhere to the notification dated 4.1.2021 read with amendment notification dated 29.08.2022 and issue appropriate instructions to the organisations under their administrative control while filling up vacancies to be reserved for persons with benchmark disabilities. Appropriate instructions may also be issued to revise the application form including online portals so as to include all sub-categories/categories of persons with benchmark disabilities as envisaged in the notification dated 04.01.2021 read with notification dated 29.08.2022 for strict compliance.

Encl: As above

(Mrityunjay Jha)

Deputy Secretary to the Government of India

Tel: 24369045

Email: mrityunjay.jha@nic.in

To,
 The Secretaries of all Central Ministries



JS(SCT)

29/09/22

Form-II

Disability Certificate (In cases of amputation or complete permanent paralysis of cases of blindness) (See rule 4)

(Name & Address of the Medical Authority issuing the Certificate)



166-59/011
9/12/01
Rohan Santosh Sinde
Patan
Rural Hospital Patan
only of disability

Certificate No.

Date: 9.12.11

Rohan Santosh Sinde

This is to certify that I have carefully examined Shri/smt/Kum.

son/wife/daughter of Shri Santosh Tanaji Sinde Date of Birth(DD/

MM/YY) 29.10.2004 Age 7 years, male/female Registration No. 28849 permanent resident of House

No. Mosatharadi Ward Village/ Street Post

office Patan District Satara State Maharashtra Whose photograph is affixed

above, and am satisfied that

(A) he/she is a case of: -Locomotor disability
- Blindness

(Please tick as applicable)

(B) the diagnosis in his/her case is (R) sided Hemiparesis

A) He/She has 50 % (in figure) (FIFTY) percent (in Words) permanent physical impairment/blindness in relation to his/her (part of body) as per guidelines (to be specified)

2. The applicant has submitted the following document as proof of residence:

Nature of Document Ration card X copy Date of issue 9-12-11 Details of authority issuing certificate

(Signature and Seal of Authorized Signatory of notified Medical Authority)

Name and seal of Member

Name and seal of Member

sd/- & Seal
Name and seal of the Chairperson
Medical Superintendent
Rural Hospital Patan

Signature / Thumb impression of the person whose favour disability certificate is issued





"ज्ञान, विज्ञान आणि सुसंस्कार यांसाठी शिक्षणप्रसार" - शिक्षणमहर्षी डॉ. बापूजी साळुंखे
Shri Swami Vivekanand Shikshan Sanstha, Kolhapur

काकासाहेब चव्हाण कॉलेज, तळमावले
KAKASAHEB CHAVAN COLLEGE, TALMAVALE

Tal. Patan, Dist. Satara 415 103

(Affiliated To Shivaji University, Kolhapur)

ARTS / COMMERCE / SCIENCE

Off. / FAX : (02372)272060 Prin (02372)272417

Re-accredited by NAAC with 'B+' Grade (CGPA 2.68)



Sr. College
Estd : June 1969
Mah./UKF 8769/Dt.17-9-1969

Sr. College
HSC1479/30230/XII H.S. Director of
Education, Maharashtra State 11-9-1979
Index No. J-21-09-002
UDISE No. 27310838102

• **FOUNDER** •

Dr. Babuji Salunkhe
B.A.B.T.D.Lit

• **PRESIDENT** •

Hon. Chandrakant (Dada) Patil
Ex Minister, Revenue Relief & Rehabilitation
Public Works, Govt. of Maharashtra

• **EXECUTIVE PRESIDENT** •

Prin. Abhaykumar Salunkhe
M.A.

• **SECRETARY** •

Prin. Mrs. Shubhangi Gavade
B.Sc.B.Ed.

PRINCIPAL :- Dr. ARUN GADE M.A., M.Phil., Ph.D. www.koctalmavale.edu.in kcc.talmavale@gmail.com

Ref. No. KCCT/358/2020-21

Date : 24/3/2021

प्रति,

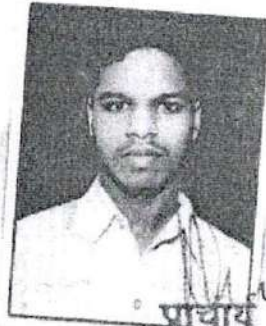
मा.श्री चाळके सौरभ दिपक (बी.ए.भाग - १)
काकासाहेब चव्हाण कॉलेज, तळमावले,
ता.पाटण, जि.सातारा



विषय - शिवाजी विद्यापीठ परीक्षा ऑक्टोंबर - २०२० परीक्षेकरिता वेळ वाढवून मिळणेबाबत
संदर्भ - दि.२२/०३/२०२१ रोजीचा आपला विनंती अर्ज

विषयांकित संदर्भीय विनंती अर्जानुसार, आपण सादर केलेल्या सिव्हील सर्जन यांच्या वैद्यकीय प्रमाणपत्र व कागदपत्रांच्या केलेल्या पडताळणीनुसार. आपणास शिवाजी विद्यापीठ परीक्षा ऑक्टोंबर - २०२० करिता ३० मि. वेळ वाढवून देणेत येत आहे.सदर परीक्षेदरम्यान शासन,शिवाजी विद्यापीठ,महाविद्यालय यांचेकडून कोव्हीड - संदर्भात घालून दिलेल्या नियमांचे पालन करणे आपणास बंधनकारक राहिल.काही अडचण असल्यास महारिद्यालय परीक्षा प्रमुख श्री नाईक सर यांचेशी संपर्क साधावा.सदरचे पत्रातील मंजूरी ही परीक्षा कालावधीपुरती राहिल. कळावे,

परीक्षार्थीचा फोटो



काकासाहेब चव्हाण कॉलेज
तळमावले, ता.पाटण, जि.सातारा

आपला विश्वासू,

(डॉ. ए. अरि. गाडे)
प्राचार्य

काकासाहेब चव्हाण कॉलेज

प्रत माहितीसाठी -

मा.संचालक,परीक्षा व मुल्यमापण मंडळ,
शिवाजी विद्यापीठ,कोल्हापूर

(नाईक सर)
ब्राम सेप



Department of Empowerment of Persons with Disabilities,
Ministry of Social Justice and Empowerment, Government of India

Disability Certificate

Issuing Medical Authority, Satara, Maharashtra



Certificate No.: MH3110420030039816

Date: 31/12/2019

This is to certify that I/We have carefully examined Kum. **Akanksha Ashok Dhere** Daughter of Shri **Ashok Dhere** Date of Birth **13/06/2003** Age **16 Year(s)** Female, Registration No. **2731/00000/1911/1412558** resident of House No. **Pandharichiwadi, Kole, Karad - 415103** Sub District **Karad** District **Satara** State / UTs **Maharashtra** Whose photograph is affixed above, and I/We satisfied that:

- (A) She is a case of Hearing Impairment
- (B) The diagnosis in her case is **Bilateral Severe Sensorineural Hearing Loss (Deaf & Mute)**

(C) She has **91%**(in figure) **Ninety One** percent(in words) Permanent in relation to her (part of body) as per guidelines (to be specified).

The applicant have been submitted the following document(s) as proof of residence

Nature of Document(s): Aadhaar card

Signature / Thumb impression of the Person With Disability

Signatory of notified Medical Authority Member



Issuing Medical Authority, Satara, Maharashtra

This Card/Certificate is meant to certify the disability of the person and is not an instrument for ID/Address Proof for any purpose.

Member of the Medical Board
Satara.

Member of the Medical Board
Satara.

President of the Medical Board
Satara.

Print

Log Out

Government of Maharashtra

Form-IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See rule 4)



NAME OF THE HOSPITAL:

District Hospital, Satara
(Maharashtra, India)

Certificate Number: 91681

Date: 16/07/14

This is to certify that I have carefully examined.

Person Identification Number: V152700133318

Aadhar Number: N/A

Shri/Smt./Kum: Bagal Pooja Chandrakant

Father Name: Shri/Smt./Kum. Bagal Chandrakant Ganpat

Date of Birth (dd/mm/yyyy): 20/11/2002

Gender: Female

Permanent Address:

House Address: A- Shibewadi, P- Gude

Village: Shibewadi

District: Satara

Taluka: Patan

Pincode: 415112

whose photograph is affixed above, and am satisfied that he / she is a case of **Visual Impairment** disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

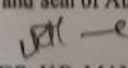
Disability	Affected part of Body	Diagnosis	Disability (in %)
Visual Impairment	Both Eyes	BE.Nystagmus with RE. microphthalmos with microcornea with LE.microcornea with iris fundus colobome	40

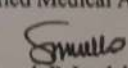
- The Above condition is **Permanent, non-progressive, not likely to improve**
- Reassessment of disability not necessary
- The applicant has submitted following documents as proof of residence:

Aadhar Card

(Signature and Seal of Authorised Signatory of notified Medical Authority)


 Dr. C. P. Katkar
 Medical Officer (Ophthalmic)
 Member
 Regn. No. : 78169


 DR. U. R. MANE
 Additional Civil Surgeon
 Member Secretary
 Regn. No. : 60171


 Dr. Suresh P. Jagdale
 President of the Medical Board
 President Satara.
 Regn. No. : 52118

Signature/Thumb impression of the person whose favour disability certificate is issued

Note: This is not valid for Medico Legal cases.



**Sw. K. Nana Patil General Hospital,
Satara.**

Certificate No.: 5110

Date: 7/10/2009



O.P.D. No.: 77361

DISABILITY CERTIFICATE

This is to certify that Shri/Smt./Kum. Aniket Arun Matekar
 Son/Wife/Daughter of Shri Arun Anaram Matekar age 6 yrs
 sex M identification Mark(s) _____ is suffering
 from permanent disability of following category:

A. Locomotor or cerebral palsy :

- i) BL-Both legs affected but not arms
- ii) BA-Both arms affected
- iii) BLA- Both legs and Both arms affected
- iv) OL-One leg affected (right or left)
 - (a) Impaired reach
 - (b) Weakness of grip
 - (c) Ataxic
- v) OA-One arm affected
 - (a) Impaired reach
 - (b) Weakness of grip
 - (c) Ataxic
- vi) BH-Stiff back and hips (Cannot sit or stand)
- vii) MW-Muscular weakness and physical endurance

Long Amelia the (1)

paralysis upper
third - (BE amputee)
(1)

B. Blindness or low vision :

- (i) B-Blind
- (ii) PB-Partially Blind

C. Hearing Impairment :

- (i) D-Deaf
- (ii) PD-Partially Deaf

(Delete the category whichever is not applicable)

2. This condition is progressive / non-progressive / likely to improve / not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of _____ years _____ months.

3. Percentage of disability in his/her case is 60 (SIXTY) percent.

4. Shri/Smt./Kum. Aniket Arun Matekar meets the following physical requirements for discharge of his / her duties :-

- | | |
|--|----------|
| (i) F-can perform work by manipulating with fingers. | Yes / No |
| (ii) PP-can perform work by pulling & pushing. | Yes / No |
| (iii) L- can perform work by lifting | Yes / No |
| (iv) KC-can perform work by kneeling & crouching. | Yes / No |
| (v) B-can perform work by bending. | Yes / No |
| (vi) S-can perform work by sitting. | Yes / No |
| (vii) ST-can perform work by standing. | Yes / No |
| (viii) W-can perform work by walking. | Yes / No |
| (ix) SB-can perform work by seeing. | Yes / No |
| (x) H-can perform work by hearing/speaking. | Yes / No |
| (xi) RW-can perform work by reading and writing. | Yes / No |

(DR) [Signature]
 Member
 Medical Board

(DR) [Signature]
 Member
 Medical Board
 Sw. K. Nana Patil General Hospital, Satara.

(DR) [Signature]
 Chairman
 Medical Board
 Sw. K. Nana Patil General Hospital, Satara.

CO PDM 3643

Health Services



V. D. Patil

No.GHS/MED / 12004
Office of the Civil Surgeon
Satara Date 14/3/04

Civil Surgeon, Satara

CERTIFICATE

This is to certify that Shri/Smt Erulab. Rajan Barge

_____ is examined at this Hospital by me on

date 18/3 /2004 on examination it has been found that she/he is

suffering from PPR & @ LE

He/She is physically handicapped person.

Permanent disability 9501. (Dis) V. D. Patil

[Handwritten Signature]

Civil Surgeon
Late Krantisingh Nana Patil
General Hospital, Satara.



UNIQUE DISABILITY ID

Government of India



नाम / Name

गवराम नाना पोटे

Gawaram Nana Pote

UD ID

MH2610619800226891

Disability Type

Locomotor Disability

Year of Birth

1980

% of Disability

42% (Forty Two Percent)


Date of Issue

17/01/2022

Valid upto

Permanent




Issuing Authority Sign

Government of Maharashtra

Form-IV

Disability Certificate

(In cases other than those mentioned in Forms II and III) (See rule 4)



NAME OF THE HOSPITAL:

Sassoon Hospitals, Pune
(Maharashtra, India)

Certificate Number: 231114

Date: 02/12/2015

This is to certify that I have carefully examined.

Person Identification Number: **PI52100324114**

Aadhar Number: N/A

Shri/Smt./Kum: **BHISE DIGAMBAR MALHARI LEELAWATI**

Wife Name: Shri/Smt./Kum. **KIRTI**

Date of Birth (dd/mm/yyyy): **7/3/1976**

Age: **39 years**

Gender: **Male**

Permanent Address:

House Address: **S.N.175/76, HIND COLONY, P.M.T DEPO NEAR BHEKARAI NAGAR, PUNE.**

Taluka: **Pune**

Village: **Pune**

Pincode: **412308**

District: **Pune**

whose photograph is affixed above, and am satisfied that he / she is a case of **Physical Impairment** disability. His / Her extent of percentage physical impairment / disability has been evaluated as per guidelines and is shown against the relevant disability in the table below :-

Disability	Affected part of Body	Diagnosis	Disability (in %)
Physical Impairment	Rt. L/L	right ll pprp	47

1. The Above condition is **Permanent, non-progressive, not likely to improve**

2. Reassessment of disability

3. The applicant has submitted following documents as proof of residence: **Voter Identity Card**

4. The applicant has submitted following documents as proof of Identity: **Voter Identity Card**

(Signature and Seal of Authorised Signatory of notified Medical Authority)

Dr. Ambartish Mathesul
2-11/15
Dr. Ambartish Mathesul
Orthopedic Surgeon Class-I/Class-II
Member
Regn. No. : 2006/04/2234

Dr. Ajay A. Taware
Resident Medical Officer
Sassoon General Hospital
Pune-1
Member Secretary
Regn. No. : 2014/04/1516

Dr. Ajay A. Taware
Dr. Ajay A. Taware
Medical Superintendent and
Chairman Disability Board
President

Reg. No. : 2001/01/0298
Dr. Ajay A. Taware
MD. (F.M.T.)
Reg. No. 2001 / 01 / 298
Superintendent
Sassoon General Hospital Pune.

Signature/Thumb impression of the person whose favour disability certificate is issued

Note: This is not valid for Medico Legal cases.