

Government of Himachal Pradesh
Department of Health and Family Welfare

No: Health-C(A)(3)-1/2016

Dated: Shimla-2, the

17th September, 2016

NOTIFICATION

The Hon'ble Supreme Court in the matter of National Legal Services Authority (NALSA) vs. Union of India and Others dated 15-04-2014 in Writ Petition (Civil) No.400 of 2012 with Writ Petition(Civil) No.604 of 2013 has declared transgender to be the third gender in Indian Law. Therefore, in compliance of the above mentioned judgment/order of Hon'ble Supreme Court, "Transgender Community" may be included for grant of Social Security Pension in the State on similar terms and condition as laid down in H.P. Social Security (Pension/Allowance) rules, 2010.

2. The Government of India has relied upon the above mentioned judgment of the Hon'ble Supreme Court of India emphasized the right of the Transgender to decide their self identified gender.

3. Accordingly, the Government has decided to constitute the State Level Medical Board as under:-

State Level Medical Board

1.	Principal IGMC, Shimla	Chairman
2.	HOD (Psychologist/Psychiatrist)	Member
3.	HOD (Gynecologist)	Member
4.	Additional/ Joint Director of Welfare	Member Secretary

4. The Government has further decided to constitute the District Level Medical Board as under:-

District Level Medical Board

1.	Chief Medical Officer	Chairman
2.	Medical Officer (Psychologist/Psychiatrist)	Member
3.	Medical Officer (Gynecologist)	Member
4.	District Welfare Officer	Member Secretary

2/-

20 SEP 2016

Handwritten signature

5 The above Board(s) would examine and identify those persons who self attest that they have no objection to medical examination as per Annexure- "A". The above Board(s) are constituted for all the Districts of H.P. for said purpose who will further issue certificate as per specimen at Annexure -"B".

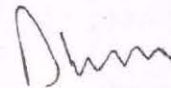
6 The above Board(s) would also examine and identify transgenders (www.judis.nic.in) in line with the aforementioned Judgement & issue certificate. Based on the Certificate issued, the Department of Social Justice and Empowerment would take further action.

By order

Secretary (Health) to the
Government of Himachal Pradesh.

Endst. No. As above Dated Shimla-171002, the 17th September, 2016
Copy forwarded to the following :

1. The Chief Secretary, Himachal Pradesh, Shimla-171002.
2. All the ACS/Pr. Secretaries/Secretaries to the Government of H.P. Shimla-2.
3. The Private Secretary to the Hon'ble Chief Minister/Ministers/CPSs, H.P.
4. The Secretary to the Governor, Himachal Pradesh, Shimla-171002.
5. All the Divisional Commissioners/HODs/DCs in Himachal Pradesh.
6. The Director of Health Services, Himachal, Pradesh, Shimla-9
7. The Mission Director(NHM), Himachal Pradesh, Shimla-9
8. The Director of Health Safety & Regulation] Himachal, Pradesh, Shimla-2
9. The Director of Medical Education & Research, Himachal; Pradesh, Shimla-9
10. The Director of Dental Health Services, Himachal; Pradesh, Shimla-9
11. The Director, SCs, OBCs and Minority Affairs, HP, SDA Complex, Kasumpti, Shimla - 171009
12. All concerned Members of the Committee.
13. All the District Welfare Officers in Himachal Pradesh.
14. Guard File.



(Bhaskar Thakur)

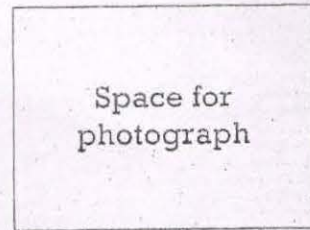
Under Secretary (Health) to the
Government of Himachal Pradesh.

APPLICATION FOR OBTAINING TRANSGENDER CERTIFICATE

1. Name
(surname) (First name) (Middle name)
2. Father's name.....Mother's name.....
3. Date of Birth...../...../.....
(date) (month) (year)
4. Age at the time of application.....years.
5. Address
(a) Permanent address (b) Current Address (i.e. for communication)
.....
.....
.....
(c) Period since when residing at current address.....
6. Educational Status (Pl.tick as applicable)
(I) Post Graduate
(II) Graduate
(III) Diploma
(IV) Higher Secondary
(V) High School
(VI) Middle
(VII) Primary
(VIII) Illiterate
7. Occupation
8. Identification marks:
(i).....
(ii).....
9. (i) Did you ever apply for issue of a Transgender certificate in the past..... YES/NO
(ii) If yes, details:
(a) Authority to whom and district in which applied.....
(b) Result of application.....
10. Have you ever been issued a Transgender Certificate in the past? If yes, please enclose a true copy.

Declaration

I hereby declare that all particulars stated above are true to the best of my knowledge and belief, and no material information has been concealed or misstated.



TRANSGENDER CERTIFICATE

(NAME AND ADDRESS OF THE MEDICAL AUTHORITY ISSUING THE CERTIFICATE)

Certificate No.

Date.....

This is to certify that I have carefully examined

Shri/Smt./Km.....son/daughter of

Shri.....Date of Birth.....Age

.....years, male/female.....

Registration No.....permanent resident of House

No.....Ward/Village.....Street.....Post

office.....District.....State.....,whose

photograph is affixed above, and am satisfied that-

he/she is a case of-

- Transgender

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

Nature of Document	Date of Issue	Details of authority issuing Certificate

.....

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

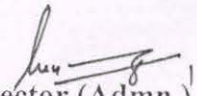
Signature /Thumb impression of the transgender person in whose favour certificate is issued.

Directorate of Higher Education
Himachal Pradesh



Endst. No. No. EDN-HE(1)B(15)-1/2010-Imp. Instt. Dated Shimla - 171001 the 19/10/2016
Copy for information and further necessary action is forwarded to :-

1. The Secretary (Health) to the Govt. of H.P. w.r.t. letter No.Health-C(A)(3)-1/2016 datd 17th September, 2016 for information please.
2. The Addl. Director of Hr. Education (C), H.P.
3. The Addl. Director of Hr. Education (S), H.P.
4. The Joint Director of Hr. Education (Admn.), H.P.
5. The Joint Director of Hr. Education, (C-I/ C-II), H.P.
6. The Joint Controller (F&A), Dte. of Hr. Education, H.P.
7. The DDO, Directorate of Higher Education, H.P.
8. The PS to the Director of Higher Education, H.P.
9. All the Branch Officer/ Superintendents, Directorate of Higher Education, H.P. for information please.
10. All the Deputy Directors of Hr. Education, H.P. with the remarks that same letter be circulated to all offices / institutions situated in your district for compliance.
11. All the Govt Degree Colleges /Govt. Sanskrit Colleges in Himchal Pradesh with the remarks that to take further necessary action in the matter accordingly.
12. The Chief Librarian, Center State Library Solan.
13. The Group Commander, GP HQ, Shimla -4.
14. The Chief Librarian, Center State Library Solan.
15. All the District Libraries in the H.P.
16. All the NCC units in the Pradesh.
- ✓ 17. The Incharge Computer Cell, Dte. of Hr. Education, H.P with the remarks to upload the said orders on the deptt. Website
18. Guard File.


Joint Director (Admn.)
Directorate of Higher Education