

SCRIBE DECLARATION FORM

GUIDELINES REGARDING PERSONS WITH DISABILITIES

Those candidates who are visually impaired and candidates whose writing speed is adversely affected permanently for any reason can use their own scribe at own cost during the online examination. In all such cases where a scribe is used, the following rules will apply:

- * Please ensure you are eligible to use a scribe as per the Government of India rules governing the recruitment of Persons with Disabilities.
- * The candidate will have to arrange his/her own scribe at his/her own cost
- * The scribe should be from an academic stream different from that stipulated for the post.
- * The scribe arranged by the candidate should not be a candidate for the same examination .If violation of the above is detected at any stage of the process, candidature of both the candidate and the scribe will be cancelled.
- * A person acting as a scribe for one candidate cannot be a scribe for another candidate.
- * Both, the candidate as well as the scribe, will have to give a suitable undertaking, in the prescribed format with passport size photograph of the scribe, confirming that the scribe fulfils all the stipulated eligibility criteria for a scribe as mentioned above. Further, in case it later transpires that s/he did not fulfill any of the laid-down eligibility criteria or suppressed material facts, the candidature of the applicant will stand cancelled, irrespective of the result of the examination.
- * Those candidates who use a scribe shall be eligible for compensatory time of 20 minutes for every hour of the examination or as otherwise advised.
- * **Visually Impaired candidates under Blind/Low Vision, who use scribe, may skip the non-verbal questions, if any, in Test of Reasoning and questions on Table/Graph, if any, in Test of Quantitative Aptitude. The candidates will be awarded marks for such Section based on the overall average obtained in other Sections of the respective test.**

Please fill up the **DECLARATION given below** and submit along with the call letter.

DECLARATION

We, the undersigned, Shri/Smt/Kum. _____
eligible candidate for the _____
examination and Shri/Smt/Kum. _____ **eligible writer (scribe)** for
the eligible candidate, do hereby declare that :

1. The scribe is identified by the candidate at his/her own cost and as per own choice. The candidate is **visually impaired** or **his/her writing speed is adversely affected permanently** and he/she needs a writer (scribe) as permissible under the Government of India rules governing the recruitment of Physically Challenged persons.
2. As per the rules, the candidate availing services of a scribe is eligible for compensatory time of 20 minutes for every hour of the examination.

3. In view of the importance of the time element and the examination being of a competitive nature, the candidate undertakes to fully satisfy the Medical Officer of the Organization that there was necessity for use of a scribe as his/her writing speed is affected by the disabilities mentioned in Paragraph '1' above.
4. We hereby declare that all the above statements made by us are true and correct to the best of our knowledge and belief. We also understand that in case it is detected at any stage of recruitment that we do not fulfill the eligibility norms and/or that the information furnished by us is incorrect/false or that we have suppressed any material fact(s), the candidature of the applicant will stand cancelled, irrespective of the result of the examination. If any of these shortcoming(s) is/are detected even after the candidate's appointment, his/her services are liable to be terminated. In such circumstances, both signatories will be liable to criminal prosecution.

I, (scribe), am not a candidate for this recruitment.

Given under our signature and contact details:-

_____ **Signature of the**

Scribe

Postal address of the Scribe:

Mobile No. of the Scribe Candidate:

Landline No. of the Scribe Candidate:

Signature of the Candidate

Registration No. :

Roll No.:

Postal address of the Candidate:

Mobile No. of the Candidate:

Landline No. of the Candidate:

Signature of Invigilator

