



**Conduct of computer-based test/examination for recruitment in group B & C category of posts
Advt. No. F.9(70)/JSSH/Estt./2018**

DECLARATION BY CANDIDATE WITH DISABILITY

I _____ S/o,W/o,D/o _____
R/o _____
Roll Number : _____ for the examination for the post of _____
(Post Code : _____) exam schedule on _____
session _____ hereby declared that Mr./Ms. _____
S/o, W/o, D/o _____, R/o _____
has agreed on my request to act as my scribe for the above online computer based test/examination.
I do hereby undertake that qualification of my scribe is _____. In case, subsequently it is
found that his qualification is not as declared by me and beyond my qualification, I shall forfeit my right to the
post and claims relating thereto.

DECLARATION BY SCRIBE/WRITER

I _____ S/o,W/o,D/o _____
R/o _____ holder of
identification _____ have agreed to act as scribe for Mr./Ms.
_____ S/o,W/o,D/o _____ the _____
(type of disability) candidate having Roll No. _____
for the examination for the post of _____ (Post Code: _____) exam scheduled
on _____ and session _____. I declared that my educational qualification as on date
_____ is (Tick the box):

Below Metric	Metric	10+2	Graduate	Postgraduate
<input type="checkbox"/>				

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recent passport size
photograph of
Scribe to be cross
self attested

Space for pasting
of recent passport
size photograph of
Candidate to be
cross self attested

If the above declaration is found false, I shall be
solely responsible for the consequences and
loss suffered by the candidate.

Signature of Scribe

If the above declaration is found false, I shall be solely
responsible for the consequences. I am engaging the
above scribe at my own cost and risk. I Understand
that if the declaration of the scribe is found false, I
may be debarred from the examination.

Signature of Candidate with Disability

Note: The candidate & scribe should report at half hour before the normal reporting time at the Exam Centre for this purpose.