



SCRIBE DECLARATION FORM

GUIDELINES REGARDING PERSONS WITH DISABILITIES

Those candidates who are visually impaired and other candidates whose writing speed is affected permanently for any reason can use own scribe at own cost during the online/offline 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 own scribe at his own cost.
- The scribe can be from any academic stream.
- 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 fulfills 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.
- Such candidate who uses a scribe shall be eligible for compensatory time of 20 minutes for every hour of the examination. (Blind/Low Vision candidates and other candidates whose writing speed is affected permanently for any reason, whether availing the facility of scribe or not shall be allowed compensatory time of 20 minutes and or part thereof for every hour of the examination.)
- 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 Numerical Ability. The candidates will be awarded marks for such Section based on the overall average obtained in other Sections of the respective test.



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Declaration form for availing scribe

**Please fill up the DECLARATION and submit the same to the Chief Superintendent
DECLARATION**

We, the undersigned, Mr. /Ms. _____ eligible candidate for the written examination to be held on from _____ to _____, Registration Number _____ and

Mr./Ms. _____ writer (scribe) for the impairment/ suffering from an injury and his/her writing speed is affected and he/ she needs a writer (scribe)

- The Candidate is blind / low vision of effected by **cerebral palsy with loco-moto impairments/ suffering from an injury and his/ her writing speed is effected** and he / she needs a writer (scribe)
- The scribe is identified by the candidate at own cost and is as per own choice.
- The scribe fulfils the following criteria: He/ She is **one grade junior** to the candidate Grade (whether graduate, post graduate etc.)

Candidate Name	Scribe Name

Particulars of Scribe	
i. Name of last examination passed in his /her academic stream	
ii. Marks memo of his/her qualification secured	

Copy of academic certificate 1 mark sheet of the Scribe is enclosed in support of the above

- As per the rules, the candidate availing services of a scribe is eligible for **compensatory time** of 20 minutes for every hour of the written examination.
- We jointly understand that the Scribe shall only record the answer as suggested by the candidate and shall not import his / her knowledge I make any gesture I sound or movement to indicate correctness or otherwise of any answer option.
- We undertake to comply with the directions of the invigilator at the center and try not to disturb other examinees.




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**VIGNAN'S****INSTITUTE OF INFORMATION TECHNOLOGY**
(AUTONOMOUS)

Re-accredited by NAAC with 'A+' Grade (CGPA of 3.41/4.00)

DUVVADA, VISAKHAPATNAM

4. Any misconduct committed by the scribe shall amount to a misconduct committed by the eligible candidate who is using the scribe and is liable for disciplinary action as may be deemed appropriate.
5. We hereby declare the 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 the eligibility norms and I or that the information furnished by us incorrect I false or that we have suppressed any material fact(s), the candidature of the applicant will stand cancelled, irrespective of the result of the written test(s). If any of these shortcomings is I are detected even after the candidate's appointment, his I her services are liable to be terminated. In such circumstances, both signatories will be liable to criminal prosecution

Given under our signature: -

Signature of the Scribe

Signature of the Candidate

Postal Address

Reg. No

Postal Address:

Mobile No: _____

Mobile No: _____

Present Occupation: _____

**Signature of the Chief Superintendent.**

Encloses:

- 1) Medical Certificate issued by a Civil Surgeon working in a Government Hospital.
- 2) A copy of the certificate of scribe's qualification along with recent photograph duly attested by the Chief Superintendent.
- 3) Request letter of student, recommended by HoD.


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