## PH.D ENTRANCE EXAM 2020-21

## LETTER OF UNDERTAKING FOR USING SCRIBE

NOTE: Candidates who are Visually Impaired (VI)/candidates whose writing speed is affected by Cerebral Palsy /muscular dystrophy/ candidates with loco motor disability (one arm)/Intellectual disability (Autism, specific learning disability and mental illness) are eligible for Scribe.

PARTICULARS OF SCRIBE PROPOSED TO BE ENGAGED BY	raste here recent con	
1. Name of the Candidate	Passport Size Photogra of the SCRIBE of s	
2. Roll No		
3. Name of Center	•	
4. Qualification of Candidate		
5. Disability Type	3 months old)	
6. Name of the Scribe	Signature across the	٠
7. Date of Birth of the Scribe		
8. Father's Name of the Scribe		
9. Address of the Scribe:		
(a) Permanent Address		
(b) Present Address		
10. Educational Qualification of the Scribe		
11. Relationship, if any, of the Scribe to the Candidate		
<ul><li>12. <b>DECLARATION:</b></li><li>i) We hereby declare that the particulars furnished above</li></ul>	are true and correct to the heat of our knowle	odac
and belief. We have read/ been read out the instruc-		_
regarding conduct of the candidates assisted by Scribe/S	•	
to abide by them.	· · · · · · · · · · · · · · · · · · ·	
ii) We do hereby undertake that the qualification of scri	be is mentioned correctly and the qualification	on of
the scribe is one step below qualification of candida		
qualification of scribe is not as declared by the candida	ate, I (the candidate) shall forfeit my right to	the
candidature and claims relating thereto.		
iii) We declare that the Scribe herself / himself is not a c		that
in case it is found otherwise the candidature of both of us iv) We declare that the scribe has not acted/will no	•	+hic
examination.	of act as scribe to any other candidate of	uns
c.a.iiiiddidii		
(Signature of the Candidate)	(Signature of the Scribe)	
Left thumb impression of the	Left thumb impression of the	

Scribe in the box given above

Candidate in the box given above