

Declaration to be submitted by Visually Handicapped Candidates /**Those candidate whose writing speed is affected by Cerebral Palsy**

1. Name of the candidate_____	Control No. (For Office Use)
2. Date of Birth of the candidate _____	Paste here recent colour Photograph of the Scribe of size 4cm X 5cm (The colour photo- graph should not be more than 3 months old)
3. Name of the Scribe_____	
4. Father's Name of the Scribe_____	
5. Address of the Scribe :	
(a) Permanent Address _____	

(b) Present Address _____	Signature of the SCRIBE

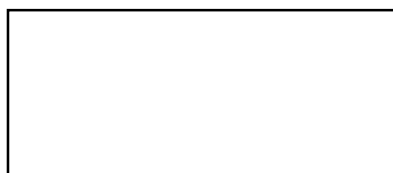
6. Educational Qualification of the Scribe:	

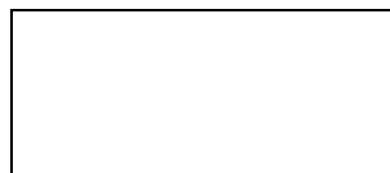
7. Relationship, if any, of the scribe to the candidate_____	

Declaration

We hereby declare that the particulars furnished above are true and correct to the best of our knowledge and belief. We have read/been read out the instructions of the Railway Recruitment Board as contained in Joint Employment Notice regarding conduct of the visually challenged candidates/scribes at this examination and hereby undertake to abide by them. We also declare that:

- (a) The academic qualification of the SCRIBE is below the qualification prescribed for the post applied for.
- *(b) The academic discipline of the SCRIBE is same as of the candidate since the application is for general posts.
- (c) The SCRIBE has not secured more than 60% marks in the qualification mentioned.
- *Strike out which is not applicable.

 (Signature of the candidate)

**Left Thumb Impression of the
Candidate**

 (Signature of the scribe)

**Left Thumb Impression of the
Scribe**