SCRIBE DECLARATION FORM FOR WRITTEN EXAM

We, the undersigned	, Shri/Smt/Kum		eligi	ble candid	date for th
examination for	recruitment of th	e post		to be	held o
	at National Foren	sic Science University	, Gandhinagar	and Shri	i/Smt/Kum
	eligible w	riter (scribe) for the e	eligible candidate	e, do here	eby declar
that :					
I. The scribe is ident	ified by the candidate	e at own cost and as p	er own choice.		
II. Qualification of the	ne candidate and the	scribe are as under:			
	Qualification (who	ther Graduate, Post	araduate etc)		7

Qualification (whether Graduate, Post graduate etc.)		
Candidate	Scribe	

- **III.** The candidate is visually impaired or affected by cerebral palsy with locomotor impairment, 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 Persons with Disability.
- **2.** In view of the importance of the time element, the examination being of a competitive nature, the candidate undertakes to fully satisfy, if necessary, the Medical Officer of the NFSU that there was necessity for use of a scribe as his/her writing speed is affected by the disabilities
- **3.** 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 written test(s). If any of these shortcomings is/are detected even after the candidate's appointment, his/her services are liable to be terminated.

Given under our signature:-

Signature of the Scribe:	Signature of the Candidate:
Name of Scribe: Address of Scribe:	Name of Candidate: Name of Applied Post: Application No.
Contract No. of Scribe	Contact No. of Candidate:

Passport Size Photo of Scribe

Enclosure:

- 1. Photocopy of Disability Certificate of the Candidate
- 2. Photocopy of Scribe's Identity Proof
- 3. Photocopy of Scribe's highest education qualification