

**PROVISION OF COMPENSATORY TIME AND ASSISTANCE OF SCRIBE
TO PERSONS WITH BENCHMARK DISABILITIES, FOR THE WRITTEN EXAMINATION
OF CET GROUP-D AGAINST ADVT. NO. 1/2023**

For Persons with Benchmark Disability (PwBD) :

Following facilities will be made available to Persons with Benchmark Disabilities (Divyangjan):

1. In case of persons with benchmark disabilities** in the category of blindness, locomotor disability (both arm affected-BA) and cerebral palsy, the scribe will be allowed, if so desired by the candidate.

**“Person with benchmark disability” means a person with not less than forty percent of a specified disability where specified disability has not been defined in measurable terms and includes a person with disability where specified disability has been defined in measurable terms, as certified by the certifying authority.

2. In case of remaining categories of persons with benchmark disabilities, the scribe will be allowed on production of a certificate to the effect that the person concerned has physical limitation to write, and scribe is essential to write examination on his/her behalf, from the Chief Medical Officer/Civil Surgeon/Medical Superintendent of a Government Health Care Institution as per proforma at **Annexure-I**, enclosed herewith (**also mentioned in Advt. 01/2023 available at official website of HSSC i.e. hssc.gov.in.**). Candidates will be allowed the scribe only if they apply for availing the scribe facility in online application form and produce the certificate at the time of written examination as well as subsequent stages of examination as per proforma at **Annexure-II**, enclosed herewith (**also mentioned in Advt. 01/2023 available at official website of HSSC i.e. hssc.gov.in.**).
3. The qualification of the scribe should be less than 10th and he/ she should not be studying in 10th class. The candidates with benchmark disabilities opting for scribe shall be required to submit details of the scribe at the time of examination as per proforma at **Annexure-I**. In addition, the scribe has to produce a valid ID proof in original at the time of examination. A photocopy of the ID proof of the scribe signed by the candidate as well as the scribe will be submitted at the time of written examination as well as subsequent stages of examination as per proforma at **Annexure-II**.

Note: It is clarified that in case of Blind/ Visually Handicapped Candidates there is no need to submit Annexure-I to Center Superintendent for entry into examination hall.

4. Scribe should not be a candidate of the same examination. If a candidate is detected as assisting another PwD candidate as scribe in this examination, then the candidatures of both the candidates will be cancelled. A compensatory time of 20 minutes per hour of examination will be provided to the candidates who are allowed to use of scribe as per Para 1 and 2 above. The candidates referred at Para 1 and 2 above, who are allowed to use of scribe but not availing the facility of scribes will also be given compensatory time of 20 minutes per hour of examination. No attendant other than the scribe for eligible candidates will be allowed inside the examination hall. The PwD candidates who have availed the facility of Scribes and/or compensatory time shall be deemed to have availed benefit of relaxation and must produce relevant documents for the eligibility of scribe/compensatory time when called upon to do so by Commission.

Annexure-I**Certificate regarding physical limitations in an examinee to write**

This is to certify that, I have examined Mr/Ms/Mrs _____
 (name of the candidate with disability), a person with _____ (nature and percentage
 of disability as mentioned in the certificate of disability), S/o/D/o
 _____ a resident of _____ Village/District/State) and to
 state that he/ she has physical limitation which hampers his/ her writing capabilities owing to
 his/her disability.

Place:

Date:

Signature and seal of the Medical Authority

Name and Seal of Member

Name and Seal of Member

Name and Seal of the Chairperson

Name of Government Hospital/ Health Care Centre with Seal

Note: Certificate should be given by specialists of the relevant stream/ disability (e.g. Visual impairment-Ophthalmologist, Locomotor disability-Orthopedic specialist/PMR).

Annexure – II**Letter of Undertaking for Using Own Scribe**

I, _____, a candidate with _____ (name of the disability) appearing for the _____ (name of the examination) bearing Roll No. _____ at _____ (name of the centre) in the District _____ (name of the State). My qualification is _____ I do hereby state that _____ (name of the scribe) will provide the service of scribe/reader for the undersigned for taking the aforesaid examination. I do hereby undertake that his/ her qualification is less than matric. In case, subsequently it is found that his/her qualification is not as declared by the undersigned and is beyond my qualification, I shall forfeit my right to the post and claims relating thereto.

(Signature of the candidate with disability)

Place:

Date: