

## MEMORANDUM

### **Subject : Combined Graduate Level Examination – 2016 – request for providing of a Scribe.**

In accordance with the provisions of the Notice, the facility of a Scribe, on request, is provided to Visually Handicapped (VH) candidates and to only such Orthopaedic Handicapped (OH) candidates who are afflicted by Cerebral Palsy and not to all OH candidates.

2. It is observed that some of the candidates have requested the Commission to provide them with the facility of a Scribe without mentioning in their Application Form whether they are;

(a) Visually Handicapped (with a disability of 40 % or more)

or else

(b) Orthopedically Handicapped (with a disability of 40% or more) afflicted by Cerebral Palsy.

3. Such visually handicapped candidates are requested to furnish a copy of Medical Certificate (in the prescribed format), issued by a Government Hospital, explicitly indicating that their visual impairment is 40% or more.

4. Similarly, in the case of orthopedically handicapped candidates afflicted by cerebral palsy, he/she would have to submit a medical certificate in the prescribed format issued by a Government Hospital explicitly specifying that the candidate is orthopedically handicapped to the extent of 40% or more and is afflicted by Cerebral Palsy.

5. In the event of the candidate not meeting the above criterion, he/she should consider withdrawing his/her request for providing a Scribe and inform the undersigned latest by **5<sup>th</sup> August, 2016**.

6. Besides above the VH/CP candidates who have **NOT** requested to be provided a scribe also need to produce a Medical Certificate in the prescribed format issued by a Government Hospital **certifying the impairment of 40% or more** so that they could be provided the facility of additional time.

7. However, while submitting the copy of the Medical Certificate the candidates are advised to invariably submit the following details:-

1. Name and address
2. Father's Name
3. Date of Birth
4. Registration ID for above mentioned Examination

8. If the candidate has some genuine difficulty in submitting such Medical Certificate, he/she must inform the Commission in this regard latest by 5<sup>th</sup> August, 2016. In such a situation he/she shall have to furnish a copy of the said medical certificate at the time of Tier-I examination to get the facility of a Scribe.

9. It may also be noted that in case no response is received from such candidates by the stipulated time, he/she may not be provided scribe and the permissible extra time.

  
(Vijayalakshmi Bidari)  
Regional Director  
SSC (KKR)  
28<sup>th</sup> July  
2016

**Staff Selection Commission  
Bangalore**

**COMBINED GRADUATE LEVEL (TIER-I) EXAMINATION, 2016 TO BE  
CONDUCTED IN COMPUTER BASED MODE FROM 27.8.2016 TO 10.9.2016 –  
SPECIAL INSTRUCTIONS TO VISUALLY HANDICAPPED CANDIDATES AND  
CEREBRAL PALSY CANDIDATES .**

All Visually Handicapped candidates and Orthopedically Handicapped candidates (with a disability of 40% or more) afflicted by Cerebral Palsy who have submitted online application for the above cited examination seeking reservation under Visually Handicapped and OH afflicted with Cerebral Palsy Categories are hereby directed to furnish the following information in the prescribed format given below along with Medical Certificate issued by Government Hospital explicitly indicating 40% or more disability. The duly furnished information in the format given below should be addressed to the Regional Director, Staff Selection Commission (KKR), I Floor, E Wing, Kendriya Sadan, Koramangala, Bangalore-560034 so as to reach on or before 5.8.2016 failing which they will not be entitled for reservation under Visually Handicapped/Cerebral Palsy Category. The cover containing the information and medical certificate should be superscribed in Bold Letters as 'CGL-2016-VH/CP MEDICAL CERTIFICATE' so as to reach the Commission on or before 5.8.2016. Information not furnished in the given format and without enclosing the medical certificate showing 40% disability will not be attended to by the Commission and such candidates will not be provided scribe and permissible extra time for the examination.

<b>INFORMATION TO BE FURNISHED BY VISUALLY HANDICAPPED (WITH DISABILITY OF 40% OR MORE AND ORTHOPEDICALLY HANDICAPPED (WITH DISABILITY OF 40% OR MORE) AFFLICTED BY CEREBRAL PALSY</b>		
1	Name of the candidate and address	
2.	Fathers Name	
3.	Centre opted for the examination.	
4.	Roll No.	
5.	Registration Id for the above mentioned examination	
6.	Category claimed	
7.	Percentage of disability (Medical certificate to be enclosed )	
8.	Whether assistance of Scribe is required	