## **Annexure-II**

## **Letter of Undertaking for Using Own Scribe**

I	, a candidate with		(nar	(name of the	
disability) appearing for the					
examination) bearing	Roll No			_ at	
(name	of the	centre) in	the	District	
,		(name or	f the State/	UT) My	
qualification is					
I do hereby state that		(name	of the scr	ibe) will	
provide the service of scribe/read	der/lab assistant	for the undersig	gned for ta	king the	
aforesaid examination					
I do hereby undertake that	his/ her qualific	eation is		In	
case, subsequently it is found th	at his/ her qual	ification is not	as declared	d by the	
undersigned and is beyond my qu	ualification, I sh	all forfeit my ri	ght to the	post and	
claims relating thereto		·		•	
g					
	(Signat	ure of the candid	lata with D	icability)	
	(Signat	are or the candic	iate with D	isability)	
e:					
e:					