Application Form for permission for Extra Time for the Visually / Physically handicapped candidates Visually/Physically handicapped challenge for Madhyamik Pariksha( Secondary Examination) December 2019

To
The Secretary,
The West Bengal Council of Rabindra Open Schooling
Bikash Bhavan, Kolkata-700091

Through the Study Centre ..............................................................

Sir,

I am a Physically handicapped/ Orthopaedically indisposed/ Mentally disorder candidate and my Registration No. is ............................................................

My disability as confirmed by enclosed medical certificate is:
A) PoorVision  B) Orthopaedic Indisposition C) Hearing Impairment D) Deafness & Dumbness
E) Mental Disorder.

I shall appear at the Madhyamik Pariksha( Secondary Examination) December 2019 and hence pray for extra time of 30 minutes as admissible under rule.

I am enclosing two (2) copies of my recent photograph and attested copy of medical certificate issued by appropriate authority for your kind consideration.

Yours faithfully,

Full Signature of the Examinee

Name of the Examinee: .................................................................
Registration Number: .................................................................

Enclosed: As stated

Counter Signature of the Coordinator with seal and date
To
The Officer-in-charge

Examination Centre Code:

Subject: Permission for extra time of 30 minutes beyond the scheduled time

Sri/Smt ..........................................................

Registration No......................................................
of Madhyamik Pariksha(Secondary Examination) December 2019

Sir/Madam,

With reference to the prayer of the Candidate dated.................................on the
above subject extra time of 30 minutes is granted in connection with the Madhyamik Pariksha
(Secondary Examination) December 2019

Please report to the Centre Secretary..........................................................

Date: ..............................................................

Secretary
Application Form for permission for the help of Amanuensis with Extra Time for the Visually Physically/Mentally Handicapped for Madhyamik Pariksha (Secondary Examination) December 2019

To
The Secretary
The West Bengal Council of Rabindra Open Schooling
Bikash Bhavan, Kolkata-700091

Through the Study Centre

Sirs,

I am a Visually handicapped/Orthopaedically indisposed/Mentally disorder candidate and my Registration No. is ____________________________

(attested copy of medical certificate issued by appropriate authority is enclosed herewith).

I shall appear at the Madhyamik Pariksha (Secondary Examination) December 2019

I am therefore, eligible to get the help of an Amanuensis with extra time of 30 minutes. I am enclosing two (2) copies of my photograph and my selected Amanuensis for your kind consideration.

Yours faithfully,

L.T.I/ Signature of the Examinee

1). Name.................................................................................................
Name of the School of Amanuensis..............................................................
Index No......................................................Student of Class..................as per enclosed certificate

Signature of the Amanuensis

2). Name.................................................................................................
Name of the School of Amanuensis..............................................................
Index No......................................................Student of Class..................as per enclosed certificate

Signature of the Amanuensis

Enclosed:
1. As stated
2. Original Certificate along with attested copy of a recent photograph of Amanuensis from the H/M of the School of which the Amanuensis is a student.
3. Attested copy of the Examinee’s Registration Card
4. Attested copy of the Examinee’s Admit Card

N.B. The selected Amanuensis must not be or must not had been a student of a higher class than IX for this Examination

Full Signature of the Coordinator with seal and date
For Examination Centre (Office Use Only)
THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING
Bikash Bhavan (2nd Floor, East Block), Bidhannagar, Kolkata-700091

To
The Officer-in-charge

Examination Centre Code:____

Subject: Permission for Amanuensis and extra time of 30 minutes

Sri/Smt.................................................................

Registration No....................................................... of Madhyamik Pariksha (Secondary Examination) December 2019

Name of the Amanuensis

1)Sri/Smt.................................................................

2)Sri/Smt.................................................................

Sir/Madam,
With reference to the prayer of the candidate dated.................. on the above subject
Amanuensis with extra time of 30 minutes is granted in connection with the Madhyamik
Pariksha (Secondary Examination) December 2019

Please report to the Centre Secretary of the Examination Centre.............................

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Secretary