

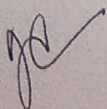
File No. PSC-R(A)/29/2020
ARUNACHAL PRADESH
PUBLIC SERVICE COMMISSION
ITANAGAR

Dated Itanagar, the 21ST October, 2020.

INSTRUCTION FOR PERSONS WITH BENCHMARK DISABILITIES

The following guidelines shall be followed in respect of Persons with Benchmark Disabilities in the APPSCC (Preliminary) Examination to be held on 1st November, 2020:-

1. Blind candidates and candidates with Locomotor Disability(both arm affected) and Cerebral Palsy where (dominant writing) extremity is affected to the extent of slowing the performance of function (minimum of 40% impairment) are entitled to compensatory time of 20 minutes per hour in both the session.
2. In case of other categories of persons with Benchmark Disabilities (minimum of 40% impairment), this facility will be provided on production of a certificate to the effect that the person concern has physical limitation to write from the Chief Medical Officer/Civil Surgeon/Medical Superintendent of a Government Health Care Institution (a Specialist of the relevant stream) as per proforma given in **APPENDIX-I**.
3. The candidates with the above mentioned disabilities shall be permitted to bring their own scribe at their own cost to write the Examination if desired (Optional). The qualification of Scribe should be one step below the qualification of the candidate taking examination but minimum qualification of Class X Pass. The candidate should submit details of his/her Scribe as per proforma at **APPENDIX-II**.
4. The Scribe should carry a valid ID Proof in Original such as Adhaar Card, Driving License, PAN Card etc.
5. There should be separate seating arrangements for candidate with Scribe, preferably on the ground floor and separate invigilator shall be deputed in the room wherever such candidates are appearing.
6. The Scribe will read out the question to the candidate and on candidates' instruction, mark and shade the appropriate circles on the objective type OMR Sheet. The candidate will clearly indicate to the Scribe as to which of the four responses in his/her estimation, is correct response so that the Scribe can mark the answer accordingly by blackening the appropriate circle with **Black Ball Point Pen**.
7. The Scribe will not make any gestures, sounds or any other response or communication design to indicate to the candidate the correctness or otherwise of the answer being recorded by him/her. Any such attempt would entail disqualification of the candidate and stringent action against both the candidate and Scribe shall be taken.
8. Those candidate desiring to bring their own Scribe should report at the Exam Centre well in advance alongwith the prescribed Proformas i.e APPENDIX-I & II in original.



This is as per the Arunachal Pradesh Public Service Combined Competitive Examination Rule (APPSCCE) 2019, existing rules and regulation and in continuation to the advertisements issued on 11th February 2020.

J. R.
21/10/2020

(A R Talwade) IAS
Secretary, APPSC
Itanagar

Memo No. PSC-R(A)/29/2020

Dated Itanagar, the 21ST October, 2020

Copy to :

1. The Editor, Arunachal Times, Itanagar
 2. The Editor Echo of Arunachal, Itanagar
 3. The Editor, Eastern Sentinel, Itanagar
 4. Administrator of Commission Website www.appsc.gov.in.com.
 5. Officer copy.
- With a request to publish this instruction in the next issue of their paper.

J. R.
21/10/2020

(A.R. Talwade) IAS
Secretary, APPSC
Itanagar

APPENDIX - I

Certificate regarding physical limitation 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.

Signature

Chief Medical Officer/Civil Surgeon/Medical Superintendent
of a Government Health care Institution

Name & Designation,
Name of Government Hospital/Health Care Centre with Seal

Place :

Date :

NOTE:

Certificate should be given by a specialist of the relevant stream/disability (eg. Visual impairment – Ophthalmologist, Locomotor disability – Orthopaedics Specialist / PMR).

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/lab assistant for the undersigned
for taking the aforesaid examination.

I do hereby undertake that his qualification _____.
In case, subsequently it is found that his 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 :

NOTE: