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

<u> </u>				am	a candid (Name and name)	
disability)	appearing	Computer			`	the post
					(na	at me of the
	·				(114)	ine of the
My qualificat	tion is			·		
I that	do		hereb	у		state
undersigned qualification case, subseq undersigned	ddress of the for taking the isuently it is for and is beyond ms relating there	aforesaid of and that his of above/related	examination. I	do her	reby certify t as declare	that his/her In ed by the
			(Signatur	e of the	Candidate wit	th Disability)
Place:						
Date:					Affix here	
DECLARAT	FION BY THE	SCRIBE			Photograph of <b>Scribe</b>	
<ol><li>Quali</li><li>I declare that</li></ol>	be enclosed: rnment ID Proof fication Proof my qualification td qualification tl			oned ak		't have equal
/mgner/relate	a quamication ti	ian that of the	candidate menti	oned at	oove.	
Signature of t	the scribe					
I have verifie	d the identity and	l qualification	of the scribe.			
			S	Signatu	re of the Gaze	etted Officer
Date:			S	Signatu	re of the exan	n Invigilator