

## **RESERVE BANK OF INDIA : RECRUITMENT OF ASSISTANTS**

### **GUIDELINES FOR VISUALLY IMPAIRED & ORTHOPEADICALLY CHALLENGED CANDIDATES USING SCRIBE**

The blind candidates/low vision candidates and candidates who are locomotor impaired in both hands and both arms and candidates whose writing speed is affected by cerebral palsy can use own scribe at their cost during the online examination. In all such cases where a scribe is used, the following rules will apply:

- i) The candidate will have to arrange his/her own scribe at his/her own cost.
- ii) The scribe can be from any academic discipline.
- iii) Both the candidate as well as the scribe will have to give a suitable undertaking in the prescribed format with passport size photograph of scribe. Further, in case it later transpires that he/she did not fulfil any of the laid-down criteria or suppressed material facts, the candidature of the applicant will stand cancelled, irrespective of the result of the online test. ***Proforma of the undertaking is available on the RBI website***
- iv) Such candidates who use a scribe shall be eligible for compensatory time of 20 minutes for every hour of the examination.

The scribe will be allowed to be used as per the guidelines issued vide Office Memorandum F.No.16-110/2003-DDIII dated February 26, 2013 of Government of India, Ministry of Social Justice and Empowerment, Department of Disability Affairs, New Delhi.

**Visually Impaired candidates under Blind/Low Vision may skip the non verbal questions, and questions based on Graph and Table, if any. The candidates will be awarded marks for such Sections based on the overall average obtained in other Sections of the respective test.**

Please fill up the **DECLARATION** and submit alongwith the call-letter.

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**DECLARATION**

We, the undersigned, Shri/Smt/Kum. \_\_\_\_\_ **eligible candidate** for the written examination for recruitment of Assistants in Reserve Bank of India, written examination to be held on \_\_\_\_\_ (date of the exam) and Shri/Smt/Kum. \_\_\_\_\_ **eligible writer (scribe)** for the eligible candidate, do hereby declare that :

- i. The scribe is identified by the candidate at own cost and as per own choice
- ii. Qualification of the candidate and the scribe are as under:

<b>Grade (whether graduate, post graduate etc.)</b>	
<b>Candidate</b>	<b>Scribe</b>

- iii. The candidate is visually impaired/affected by **cerebral palsy with loco-motor impairment and his/her writing speed is affected** and he/she needs a writer (scribe) as permissible under the Government of India rules governing the recruitment of Persons with Disability.
2. As per the rules, the candidate availing services of a scribe is eligible for compensatory time of 20 minutes for every hour of the written examination.

**Only those Visually Impaired candidates under Blind/Low Vision may skip the non-verbal questions, and questions based on Graph and Table, if any. The candidates will be awarded marks for such Sections based on the overall average obtained in other Sections of the respective test.**

3. In view of the importance of the time element, the examination being of a competitive nature, the candidate undertakes to fully satisfy the Medical Officer of the Concerned Organization that there was necessity for use of a scribe as his/her writing speed is affected by the disabilities.
4. We hereby declare that all the above statements made by us are true and correct to the best of our knowledge and belief. We also understand that in case it is detected at any stage of recruitment that we do not fulfill the eligibility norms and/or that the information furnished by us is incorrect/false or that we

have suppressed any material fact(s), the candidature of the applicant will stand cancelled, irrespective of the result of the written test(s). If any of these shortcomings is/are detected even after the candidate's appointment, his/her services are liable to be terminated.

**Given under our signature:-**

**Signature of the Scribe**

**Signature of the Candidate  
Roll No.:**

**Postal address:**

**Postal address:**

**STD Code ..... Phone No.....**

**STD Code ..... Phone No.....**

**PHOTO  
OF  
THE  
SCRIBE**

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**Signature of Invigilator**