



**West Bengal Board of Secondary Education**  
Nivedita Bhawan, DJ-8, Sector-II, Salt Lake, Kolkata – 700091.

Application Form for permission to help of Amanuensis with extra time for sightless / physically (orthopaedically) challenged candidate of Madhyamik Pariksha (S.E), 2015

To  
The Dy. Secretary (Examination),  
West Bengal Board of Secondary Education  
Nivedita Bhawan, Salt Lake, Kolkata-700091.

(1)  
Attested stamp  
size photograph  
of Amanuensis  
(Black & White)

(2)  
Attested stamp  
size photograph  
of Amanuensis  
(Black & White)

Attested stamp  
size photograph  
of candidate  
(Black & White)

Sir, Through the Head of the Institution \_\_\_\_\_

I like to inform you that I happen to be a **sightless / physically (orthopaedically) challenged candidate** (attested copy of medical certificate issued by appropriate authority is enclosed here) and will appear at the M.P.(S.E), 2015 with Registration No. \_\_\_\_\_ from \_\_\_\_\_ (Name of the school). I am not in a position to write anything which will be evident from my medical certificate.

I am sending my photographs along with the photographs of two selected amanuenses 1 set each for your consideration. I, therefore, pray to you for granting me an amanuensis along with extra time of 45 minutes.

Yours faithfully,

I agree to help as an amanuensis.

1) Name \_\_\_\_\_

Name of the School of amanuensis \_\_\_\_\_

Index No. \_\_\_\_\_ student of Class \_\_\_\_\_

as per enclosed certificate.

Signature of the Amanuensis \_\_\_\_\_

\_\_\_\_\_  
L.T.I./Signature of the Examinee

Name of the Examinee(in Block Letters)  
Contact No. \_\_\_\_\_

The above statements are true to my knowledge.

2) Name \_\_\_\_\_

Name of the School of amanuensis \_\_\_\_\_

Index No. \_\_\_\_\_ student of Class \_\_\_\_\_

as per enclosed certificate.

Signature of the Amanuensis \_\_\_\_\_

Signature of the Head of the Institution (with seal and date)

Contact No. \_\_\_\_\_

- Encl. : 1) Photocopy of disability certificate  
 2) Certificate from the Head of the Institution (of which the Amanuensis is a student).  
 3) One copy of photograph of each of the Candidate and Amanuensis.  
 4) Photocopy of Registration Certificate of the examinee.

N.B. : \* 'Amanuensis means a person having qualifications ordinarily not higher than Class-IX standard appointed by the Board to write answers in the examination on behalf of a physically challenged / sightless candidate.

\*\* Last date of submission of Application Form 31.12.2014.