


GOVERNMENT OF JAMMU AND KASHMIR
J&K SERVICES SELECTION BOARD
Hema Complex, Sector No. 3
Channi Himmat, Jammu

NOTICE

It is notified for the information of candidates who are appearing in the OMR based objective type written test for the post of **Class IV on 27th, 28th of February and 1st of March 2021 from 12.00 noon to 2.00 p.m.** across the UT of J&K and who are opting for their own Scribe, would require to submit the details of their scribe & represent to the J&K Services Selection Board through email on (**jkssbscribe@gmail.com**) and also require to submit following documents:-

1. Representation of candidate applied for Scribe.
2. Person with Disability Certificate (self-attested).
3. Certificate regarding physical limitation in an examinee to write (format enclosed as Annexure "A")
4. Letter of Undertaking for Using Own Scribe(format enclosed as Annexure "B")
5. Admit Card/ Roll Number.
6. Qualification certificate of Scribe (self-attested).
7. Mobile Number of candidate on which **WhatsApp** used.


18/02/21
Controller of Examinations
J&K Services Selection Board
Jammu

No. SSB/Class -IV/2021/1608-14

Dated:-18-02-2021

Copy to the:-

- 1- Principal Secretary to the Hon'ble Lieutenant Governor, J&K
- 2- Commissioner/Secretary to Government, General Administration Department, Civil Secretariat, for information.
- 3- Director Information JK UT with the request to publish the notice in the leading newspapers of Jammu & Kashmir on 19-02-2021.
- 4- Administrative Officer, J&K SSB, Kashmir/Jammu for information.
- 5- Pvt. Secretary to Chief Secretary for the information of the worthy Chief Secretary.
- 6- Pvt. Secretary to Chairman, JKSSB, for the information of Chairman
- 7- Incharge website for uploading of the same official website of the Board.
- 8- IT Section, SSB for information and checking above said email and consolidate the representation regarding Scribe.

Annexure "A"

Certificate regarding physical limitation in an examinee to write.

This is to certify that, I have examined Mr/Mrs/Ms _____ (name of the candidate with disability), a person with _____ (nature and percentage of disability as mention 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 of the Specialist

Name, Designation of the Specialist.

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- Orthopedic Specialist /PMR)

Annexure "B"

Letter of Undertaking for Using Own Scribe

I _____, a candidate with _____
(name of the disability) appearing for the _____ (name of the
centre) in the District _____ of UT of J&K. 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/her qualification is
_____. In case, subsequently it is found that
his/her 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:-