Advt. No: NEERI/1/2025

## **Annexure-VI**

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

1	, a candidate with					
(name of the disability) appearing for the					(n	ame of the
examination) bearing Roll No.						at
	(name	of	the	centre)	in th	e District
				(na	ame of the	e State/UT).
My qualification is					·	
I do hereby state that			(na	me of the s	scribe) will	provide the
service of scribe/reader/lab assistant for the un	dersigned f	for tal	king the	e aforesaid	examinat	ion.
I do hereby undertake that his/her qualific	ation is					In case,
subsequently it is found that his / her qualificati			-		rsigned ar	nd is beyond
my qualification, I shall forfeit my right to the po	st and clair	ms re	lating t	hereto.		
		(Si	gnature	of the car	ndidate wi	th Disability)
Place:						
Deter						
Date:						