

Please attache annexure 8/9/10 which is relevant to your type of PwD with this annexure.  
Both are necessary for claiming exemption from the typing test.

**ANNEXURE-XIII**

FORM OF MEDICAL CERTIFICATE TO BE PRODUCED BY THE PERSON WITH  
DISABILITY CANDIDATES WHO SEEK EXEMPTION FROM APPEARING IN THE  
TYPING TEST .

This is to certify that Sh/Smt/Kum \_\_\_\_\_son/daughter/wife of Shri\_\_\_\_\_is  
suffering from \_\_\_\_\_.

Clinical diagnosis as a result of which he/ she has the following disabilities. (Brief description of  
his/ her disabilities) -----  
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This is a permanent disability and the extent of his/ her disability works out to \_\_\_\_% of disability.  
This disability is likely to interfere with Typewriting (specify)  
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Photograph of  
candidate clearly  
showing face with  
affected portion of the  
body

Signature of Civil Surgeon:  
Name:  
(Official Stamp)  
Place:  
Date:

Signature of candidate:  
Name:  
Roll Number: