



# M.P. POWER GENERATING COMPANY LIMITED

(A Government of MP Undertaking)

Advertisement No. ED(HR&A)/MPPGCL/Rectt./2023-24/1153, Jabalpur, Dated 09/03/2024



## Conduct of online Computer Bases Test for recruitment to various posts in M.P. Power Generating Co. Limited (MPPGCL)

### DECLARATION BY THE BLIND/OH CANDIDATE

I \_\_\_\_\_ S/o,W/o,D/o \_\_\_\_\_  
 R/o \_\_\_\_\_  
 Roll Number : \_\_\_\_\_ for the examination for the post of \_\_\_\_\_  
 \_\_\_\_\_ (Post Code : \_\_\_\_\_) exam schedule on \_\_\_\_/\_\_\_\_/2024 session \_\_\_\_\_  
 hereby declared that Mr./Ms. \_\_\_\_\_ S/o, W/o, D/o \_\_\_\_\_  
 \_\_\_\_\_, R/o \_\_\_\_\_ has  
 agreed on my request to act as my scribe for the above online computer based test/examination.

### DECLARATION BY THE SCRIBE/READER

I \_\_\_\_\_ S/o,W/o,D/o \_\_\_\_\_  
 R/o \_\_\_\_\_  
 holder of identification \_\_\_\_\_ have agreed to act as scribe for Mr./Ms. \_\_\_\_\_  
 \_\_\_\_\_ S/o, W/o, D/o \_\_\_\_\_ the  
 Blind / Partly Blind / OH candidate having Roll No. \_\_\_\_\_ for the examination for the  
 post of \_\_\_\_\_ (Post Code: \_\_\_\_\_) exam scheduled on \_\_\_\_/\_\_\_\_/2024  
 and Session \_\_\_\_\_.

I declared that my educational qualification as on date \_\_\_\_\_ is (Tick the box):

Below Metric	Metric	10+2	ITI / Diploma	Graduate	Post Graduate
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Space for pasting of  
 recent passport size  
 photograph of  
**Scribe** to be cross  
 self attested

Space for pasting of  
 recent passport size  
 photograph of  
**Candidate** to be  
 cross self attested

If the above declaration is found false, I shall be solely responsible for the consequences and loss suffered by the candidate.

If the above declaration is found false, I shall be solely responsible for the consequences. I am engaging the above scribe at my own cost and risk. I understand that if the declaration of the scribe is found false, I may be debarred from the examination.

Signature of Scribe/Reader

Signature/Thumb Impression of the Blind/OH Candidate

**Note: The candidate & scribe should report at half hour before the normal reporting time at the Exam Centre for this purpose.**