

**GOVERNMENT OF MANIPUR**  
**DIRECTORATE OF EDUCATION(S)**  
(Administrative Section)

**NOTIFICATION**

Imphal, the 19<sup>th</sup> February, 2019.

**No: AO/252/MTS/2016(5)-DE(S) Pt-I:** In continuation of this Office Notification of even number dated 20/8/2018, 6/9/2018 and 20/9/2018 pertaining to recruitment of 413 number of Multi Tasking Staffs (MTS) Group – D in the Department of Education(S), Manipur, it is hereby further notified for information to all the Visually Impaired (Persons with Disabilities) applicants who are willing to avail the personal Scribe to furnish duly filled in the DECLARATIONS (by the Candidate and the Scribe) appended herewith which are uploaded in the official website [www.manipureducation.gov.in](http://www.manipureducation.gov.in) for convenience of all concerned.

2. Duly filled in DECLARATIONS should reach the office of the undersigned on or before 25<sup>th</sup> February, 2019.



(Th. Kirankumar) 19/2/2019

**Director of Education (S), Manipur**

Copy to:

1. PPS to the Hon'ble Education Minister, Manipur.
2. Commissioner, Education(S), Government of Manipur
3. Addl. Director of Education/Schools (Hills/Valley/Plg./Grievances), Manipur.
4. Administrative Officer. *For uploading in the Official website.*
5. The Editor, Poknapham(M)/Sangai Express(E/M)/Sanaleibak(M) *with request to publish the above Notification for 2 (two) alternate days only. Bill in duplicate may be submitted to the Directorate for early payment.*
6. Relevant file.

## **DECLARATION BY CANDIDATE**

I.....S/o,W/o,D/o.....  
..... R/o.....  
Roll Number ..... for the Written Examination for the post of Multi Tasking Staff (MTS) under the Department of Education(S) scheduled on Sunday, the 3<sup>rd</sup> March 2019, do hereby declare that Mr/ Mrs/ Shri/ Shrimati .....  
S/o, W/o, D/o .....  
R/o.....  
has agreed on my request to act as my scribe for the above written examination.

Maximum educational qualification for Scribe as on date:			is(Tick the Class)
VI	VII	VIII	IX

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 the Candidate

Signature of Scribe

Space for pasting of  
recent passport size  
photograph of scribe to  
be attested by a  
Gazetted Officer

## **DECLARATION BY SCRIBE**

I.....  
S/o,W/o,D/o.....  
R/o.....  
holder of identification ..... have agreed to act as scribe for  
Mr./Mrs. ....  
S/o,W/o,D/o.....  
R/o.....

Space for pasting of  
recent passport size  
photograph of scribe  
to be attested by a  
Gazetted Officer

The Blind & Partly Blind Candidate (VH & VI) having Roll No..... for the post of Multi  
Tasking Staff(MT) under the Department of Education(S) scheduled on Sunday, the 3<sup>rd</sup> March  
2019.

Maximum educational qualification for Scribe as on date:			is(Tick the Class)
VI	VII	VIII	IX

If the above declaration is found false, I shall be solely responsible for the consequences  
and loss suffered by the candidate. My photograph pasted on this declaration has been duly  
attested by a gazetted officer whose particular are given below.

- 1 . Name of gazetted Officer :
- 2 . Designation :
- 3 . Office Address & Phone No:
- 4 . Signature & Seal :

Signature of Scribe

Signature of the Candidate

*Note 1: The scribe is required to bring the following attested documents (i) Identification proof  
(ii) Educational qualification (iii) Two recently taken passport photograph at the examination  
centre on the day of exam for the verification by officer in charge of the exam centre. The  
candidate & scribe should report at least one hour before the normal reporting time at the  
Exam centre for this purpose.*

*Note 2: The year of passing of the maximum educational qualification mentioned above must  
be in accordance with the instructions given in the notice of Examination/General instructions to  
the candidate.*