



**COUNCIL OF HIGHER SECONDARY EDUCATION, ODISHA**  
**PRAJNAPITHA, SAMANTAPUR, BHUBANESWAR -13.**

**NOTIFICATION**

**Schedule & Guide lines for On-line Form Fill-up for Regular & Ex-Regular students (Arts, Science, Commerce & Vocational streams including the Correspondence Course students) for appearing at the Annual H.S. Examination, 2021**

Bhubaneswar dated 1<sup>st</sup> February, 2021.

No. EG-1-05/21/563/CHSE./ The Form Fill-up schedule, Fees payable and other important instructions for the Regular, Ex-Regular and Correspondence Course students (Regular & Ex-Regular) for the Annual Higher Secondary Examination, 2021 is notified herewith for information of all concerned.

- 01 (a) Tentative date for commencement of Practical Examination- 29.04.2021.  
(b) Tentative date for commencement of Theory Examination- 15.05.2021

02. Scheduled Dates for filling-up of forms

Category	Without Fine	With fine of ₹ 50/- per student	With fine of ₹ 350/- per student
Ex-Regular	06.02.2021 to 12.02.2021	13.02.2021 to 19.02.2021	20.02.2021 to 03.03.2021
Regular	12.02.2021 to 24.02.2021	25.02.2021 to 28.02.2021	01.03.2021 to 03.03.2021
Correspondence Course students (Regular & Ex-Regular)	12.02.2021 to 24.02.2021	25.02.2021 to 28.02.2021	01.03.2021 to 03.03.2021

**IMPORTANT** - The last date of Form Fill-up for all categories of students is dt. 03.03.2021. Students, Parents & Guardians are advised to be careful for fill-up of forms latest by dt. 03.03.2021 positively. No. extension of dates for form fill-up will be made under any circumstances due to paucity of time for all preparatory arrangements for the ensuing Annual H.S. Examination, 2021.

03. **Fees payable by the candidates (Arts/ Science/ Commerce /Vocational Streams & Correspondence Course students) to the Council.**

(1) Examination & Other Fees (per student)	-	₹ 520/-
(2) Practical Examination Fees/Project work fees (per paper)	-	₹ 40/-
(Science Stream : (Biology)Botany -₹ 40/- +Zoology- ₹ 40/-)		
(3) 1 <sup>st</sup> Late Fine (Per student)	-	₹ 50/-
(4) 2 <sup>nd</sup> Late Fine (Per student)	-	₹ 350/-
(5) Additional Centre Charge (Per student)	-	₹ 50/-

(The Additional Centre Charge is payable by the candidates of Institutions which are newly opened and have obtained Govt. Recognition/Permission during or after the Academic Year2017-18)

[ If any Higher Secondary School is demanding more amount of Examination fees, the matter may be brought to the notice of the Controller of Examinations/Director, Higher Secondary Education in writing ]

[Candidates with benchmark disabilities are eligible for Examination fee waiver of ₹ 165/- (Examination Fees) Plus the Practical /Project Examination Fees @ ₹ 40/- per paper]

04. **SYLLABUS AND QUESTION PATTERN**

For Regular and Ex-Regular students (Registered in 2016 & onwards) coming under New Syllabus.

1. Questions will be asked from reduced (70%) Syllabus.
2. Question Pattern
  - A. Multiple Choice Questions (carrying 1 mark each)- covering average 50% of total marks.
  - B. Short answer type Questions (carrying 2/3 marks) – Average 30% of total marks with more number of Options.
  - C. Long answer type Questions- (within 5 marks) – Average 20% of total marks with more number of options.

For Ex-Regular students coming under Old Syllabus (Registered up to 2015) : - Syllabus & Question Pattern will remain same unchanged.

**05. DOCUMENTS TO BE FURNISHED BY THE CANDIDATES IN THE H.S. SCHOOL FOR FORM FILL-UP VERIFICATION**

1. College Identity Card
2. 10<sup>th</sup> Pass Original Board Certificate & Mark Sheet with Self-attested Photocopy.
3. Original CHSE. Registration Card with Self-attested copy.
4. Two Nos. of Recent Pass Port size coloured photographs.
5. Admit Card of previous Examination (For Ex-Regular students)
6. All Original failed mark sheets with two sets of Self-Attested copies ( For Ex-Regular Students)

**06. IMPORTANT INSTRUCTIONS**

- (i) The Forms are to be filled only in the on-line mode. No off-line Forms will be accepted by the Council.
- (ii) Students are advised to fill-up/verify their data meticulously before submission & uploading of 3G Forms. The College/School authorities are also required to verify the data before uploading of 3G Forms. **Council shall not be responsible for any wrong data furnished by the student/H.S. School.**
- (iii) A candidate, who has failed in one or more subjects in the Annual H.S. Examination, 2019 & 2020 but has secured at least 210 marks in Aggregate or more is eligible to appear Compartmentally in that or those papers. Failed candidates of earlier years are not eligible to appear Compartmentally. The Compartmental candidate has to clear all the failed subjects at a time and not in piecemeal manner appearing at any of the available chances. Pass Certificate will not be awarded to the candidates appearing Compartmentally without eligibility/appearing Compartmentally after two consecutive chances/appearing the failed papers in a piecemeal manner as per Regulation 120 of the Orissa Higher Secondary Education Act & Regulations, 1982 and the result of such candidates will be cancelled by the Council.
- (iv) Regular Correspondence Course students are required to fill-up their forms in their respective Higher Secondary Schools, where they have taken admission. Ex-Regular Correspondence Course students are required to fill-up their forms in the H.S. School, where they had appeared and failed in the last examination.
- (v) The students are advised to remain in contact with their concerned

Higher Secondary School for filling up forms within the scheduled time period. No further time extension will be allowed under any circumstances because of the paucity of time for making all preparatory arrangements for the ensuing Annual H.S. Examination, 2021.

- (vi) Admit Cards of the candidates will be made available on-line through their respective Higher Secondary Schools. Errors, if any, in the Admit Cards must be brought to the notice of the Office of the Controller of Examinations immediately without delay after issue of Admit Cards by the Council for necessary rectification.
- (vii) Principals are requested to collect the mark sheets of candidates from CHSE Head Office who were booked under Malpractice in 2020.

- (viii) Candidates desirous of Centre Change on the ground of Death/Retirement from Govt. Service of Father/Mother; Transfer of Father /Mother /Spouse; Marriage in case of Girl Child, must fill up necessary form available at **Annexure -'A'** enclosing the requisite documents at the time of form fill-up and submit with their H.S. Schools for onward transmission to the Council. However, such permission can't be claimed as a matter of right.

**Documents to be submitted for centre change**

- (i) Death of Father/Mother (Copy of Death Certificate to be enclosed)  
(ii) Retirement of Father/Mother from Govt. service (copy of superannuation order with contact number of the Father, Mother and the then employer)  
(iii) Transfer of Father/Mother/Spouse if employed under State Govt./State Govt. undertaking/Central Govt./Central Govt. undertaking (enclose copy of the transfer order with contact number of Father/Mother/Spouse and the present and past employer)  
(iv) Marriage in case of Girls students. (enclose marriage certificate, contact number of Father/Mother, joint photograph with Husband and contact number of Husband)

No change of centre can will be ordinarily allowed if the distance of the centre applied for is not more than 30 (Thirty) Kilometers from the parent H.S. School.

A non-refundable fee of ₹ 500/- (Rupees Five Hundred) only is to be deposited at the time of submission of application form. This amount is not refundable.

The Council reserves the right to reject the Centre Change application without assigning any reason thereof or to allot an Examination Centre in the area other than the centre applied for. No communication is to be made if the application is rejected.

**Correspondence Course candidates are not allowed to change Examination Centre.**

- (ix) Candidates with benchmark disability and limitations to write are required to apply for the facility of Scribe/Reader/Lab Assistant &/ or compensatory time in the prescribed application form available at **Annexure-'B'** with necessary supporting documents and enclosures at the time of form fill-up for onward transmission to CHSE.

**The qualification of the Scribe must be one step below the qualification of the candidate.**

All the candidates with benchmark disabilities not eligible/interested for facility of Scribe can apply for compensatory time at the time of form fill-up through their respective H.S. School for onward transmission to the Council. The students are advised to refer to the Notification No. **459 dt. 25.01.2019** enclosed at **Annexure-C** for detailed guidelines.

By orders of Chairman

  
01.02.2021  
Controller of Examinations

Memo No. 564 /CHSE, Dt. 01.02.21 /

Copy submitted to the Private Secretary to Hon'ble Minister, School & Mass Education, Govt. of Odisha, Bhubaneswar for kind information of the Hon'ble Minister.

  
Controller of Examinations

Memo No. 565 /CHSE, Dt. 01.02.21 /

Copy submitted to P.S. to the Principal Secretary, Department of School and Mass Education, Bhubaneswar/Director, Higher Secondary Education, Odisha, Bhubaneswar/Director, Higher Education, Odisha, Bhubaneswar for kind information.

  
Controller of Examinations

Memo No. 566 /CHSE Dt. 01.02.21 /

Copy forwarded to Controller of Examinations Utakal University, Vanivihar, Bhubaneswar/Sambalpur University, Jyotivihar, Burla/Berhampur University, Bhanjavihar, Berhampur/North Odisha University, Sriramvihar, Takatpur, Baripada /Fakir Mohan University, Balasore/Sri Jagannath Sanskrit University, Puri/Board of Secondary Education, Odisha, Cuttack for information and necessary action.

  
Controller of Examinations

Memo No. 567 /CHSE Dt. 01.02.21 /

Copy forwarded to All Principals of Higher Secondary Schools/Colleges affiliated under CHSE, Odisha for information and necessary action.

  
Controller of Examinations

Memo No. 568 /CHSE Dt. 01.02.21 /

Copy forwarded to All Officers/All Sections of the Council for information and necessary action. S.O. PPS Section is requested to keep ready all the printed stationeries immediately in connection with filling up of forms and supply to S.O. EC-I, EC-II and Zonal Offices for Annual H. S. Examination, 2021.

  
Controller of Examinations

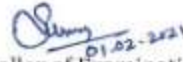
Memo No. 569 /CHSE, Dt. 01.02.21 /

Copy forwarded to Deputy Secretaries of three Zonal Offices located at Berhampur/Sambalpur/Baripada for information and necessary action. They are required to verify all the compartmental cases with regard to eligibility and correctness of the papers and submit the same in the Head Office within Seven days from the receipt of Annexure-I & II.

  
Controller of Examinations

Memo No. 570 /CHSE Dt. 01.02.21 /

Copy forwarded to the Finance Officer/F.S.-I/II/F.S.-III/Notice Board and Information Counter for information and necessary action.

  
01.02.2021

Controller of Examinations

Memo No. 571 /CHSE Dt. 01.02.21 /

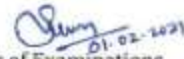
Copy forwarded to the Director, Govt. of Odisha, I & PR Department for information and necessary action. He is requested to circulate the Notification among the Print and Electronic Media Houses for publication free of cost in the greater interest of the students

  
01.02.2021

Controller of Examinations

Memo No. 572 /CHSE Dt. 01.02.21 /

Copy forwarded to Chief Manager, SBI, IRC Village, Nayapalli, Bhubaneswar for information and necessary action. He is requested to take suitable steps for activation of SB Collect mode as per schedule to be furnished for remittance of fees by the H.S. Schools.

  
01.02.2021

Controller of Examinations

Memo No. 573 /CHSE Dt. 01.02.21 /

Copy forwarded to the General Manager (Admin), Odisha Computer Application Centre, Acharyavihar, Bhubaneswar for information and necessary action. He is requested to upload this notification in SAMS notice for information of all Higher Secondary Schools and take necessary steps for on-line form fill-up of Regular, Ex-Regular & Correspondence Course students.

  
01.02.2021

Controller of Examinations.

Memo No. 574 /CHSE Dt. 01.02.21 /

Copy forwarded to the DDG & SIO, NIC, Odisha, Bhubaneswar for information and necessary action. He is requested to take necessary steps to upload this notification in the Council web-site: [www.chseodisha.nic.in](http://www.chseodisha.nic.in) for information of all concerned.

  
01.02.2021

Controller of Examinations



**COUNCIL OF HIGHER SECONDARY EDUCATION, ODISHA  
PRAJNAPITHA, C/2, SAMANTAPUR, BHUBANEWAR-751013  
APPLICATION FORM FOR CHANGE OF EXAMINATION CENTRE FOR THE ANNUAL  
H. S. EXAMINATION, 2021.**

(Please read carefully the important Notes, Terms & Conditions before applying)  
Correspondence Candidates are not allowed to Change Examination Centres. Change of  
Centre is allowed only to Govt./Full Aided Colleges.

1. (a) Name of the Applicant : \_\_\_\_\_  
(in Capital Letters)  
(b) Category : \_\_\_\_\_  
(c) Registration. No. : \_\_\_\_\_
2. Name (a) (Father) : \_\_\_\_\_  
(b) (Mother) : \_\_\_\_\_
3. Permanent Address (In Capital): \_\_\_\_\_  
: \_\_\_\_\_
4. Present Address (In Capital) : \_\_\_\_\_  
(For Correspondence) : \_\_\_\_\_
- (i) Contact No. of the Candidate : \_\_\_\_\_  
(ii) Contact No. of Parents : \_\_\_\_\_
5. (a) Name & Address of the Institutions in : \_\_\_\_\_  
which the applicant is studying  
(b) Stream : \_\_\_\_\_

	Subject	
	Compulsory	Elective
(1) English		(1) _____
(2) MIL { }		(2) _____
		(3) _____
		(4) _____

- 6.(a) Name of the Examination Centre and : \_\_\_\_\_  
Address through which the applicant  
desires to appear.
- (b) Whether the subjects of the applicant are available in the College to which the  
candidate desires to change: \_\_\_\_\_

// 2 //

7. Distance between the two Colleges in : \_\_\_\_\_  
Kilo meters (permission will not be granted if the distance is 30 Kms or less)
8. Details deposit of Rs.500/- towards fees M.R./B.D. No. \_\_\_\_\_  
Date \_\_\_\_\_
9. (a) Reasons for intending to change of : \_\_\_\_\_  
Examination Centre
- (b) List of documents submitted
1. Xerox copy of Registration Receipt
  2. Xerox copy of Mark Sheet (if appeared)
  3. Self-attested copies of documents regarding genuineness of ground  
(As mentioned in the guidelines)
- (i)
- (ii)
- (iii)

**DECLARATION AND UNDERTAKING**

10. (a) I, hereby, undertake to abide by all the terms and conditions in respect of change of examination centre as imposed by the Council.
- (b) I, hereby, declare that all the statements made by me in this application form are true to the best of my knowledge and belief, I undertake that, if at any time, it is found that any information given in this application is false/incorrect, the Council may cancel my result without notice or take any action as deemed fit & proper.

DATE : \_\_\_\_\_ FULL SIGNATURE OF THE APPLICANT

PLACE :

11. **CERTIFICATE OF THE PARENT COLLEGE :**

The information given in this form is correct as per the records verified by me and I have no objection if the candidate is allowed to change his/her centre of examination on the ground of \_\_\_\_\_.

The ground for change of examination centre as specified by the candidate is true and genuine to the best of my knowledge and belief. I recommend his case to the CHSE for change of examination centre opted by the candidate.

His/Her Subjects are :

English , MIL ( \_\_\_\_\_ )

Elective Subjects :

SIGNATURE OF THE PRINCIPAL  
WITH DATE & SEAL

Contd...3/-



// 3 //

12. **CERTIFICATE BY THE PRINCIPAL OF THE FULL AIDED/GOVT. COLLEGE THROUGH WHICH THE APPLICANT DESIRES TO APPEAR :**

- (i) I have verified the documents submitted by the candidate along with the application form and found to be genuine.
- (ii) I have no objection if the candidate is allowed to appear through this centre. I further declare that this college has the recognition/affiliation of the subjects in which the candidate desires to appear and at present teaching is being provided in these subjects and this year also Regular students of this college are going to appear the examination with these subjects.
- (iii) I, declare that with this permission, the number of candidates allowed to appear the examination in this college on the basis of change of centre does not exceed the permissible limit of **2 (two)** in this Stream. In case any deviation is found, all the applications for the change of centre to this college shall be rejected.

I shall be held responsible if any deviation is found.

I shall bear all the additional expenses, incurred by Council on account of any deviation made by me.

Signature & Seal of the Principal  
permitting the candidate to appear  
through his/her College Centre



ANNEXURE-'B'

**COUNCIL OF HIGHER SECONDARY EDUCATION, ODISHA  
PRAJNAPITHA, SAMANTAPUR, BHUBANEWAR-751013  
APPLICATION FORM FOR THE FACILITY OF SCRIBE/READER/LAB. ASST./TAKING  
COMPENSATORY TIME IN EXAMINATION BY CANDIDATES WITH DISABILITY**

(If cannot be filled in by the candidate himself/herself, this application form may be filled in by the Father or Mother or Legal Guardian)

(Incomplete application form in any respect and without supporting documents will be out rightly rejected)

**PART-I (FOR APPLICANT)**

1. Name of the Applicant (in Capital Letters) : \_\_\_\_\_
2. Registration No. : \_\_\_\_\_
3. Name of the College from which the Candidate has been sent up : \_\_\_\_\_
4. Name of the Father/Mother or Guardian : \_\_\_\_\_
- Contact Number : \_\_\_\_\_
5. Permanent Address : \_\_\_\_\_  
: \_\_\_\_\_
6. Present Address (for correspondence) : \_\_\_\_\_  
: \_\_\_\_\_
- Contact Number : \_\_\_\_\_
7. Subject(s) of Examination (i) Compulsory : English, MIL ( )  
(ii) Electives :
8. **Documents to be submitted by the applicant along with this application**
  - (i) The Original and a photocopy of the certificate of physical deformity given by Competent Medical authority to the effect that the deformity is **40% or above and the candidate cannot write by himself/herself.**
  - (ii) Two attested photographs depicting fully the deformed part of the body of the candidate.

Contd...2/-

**// 2 //**  
**DECLARATION**

**9. (A) I do hereby declare that :**

- (i) I am a physically disabled candidate with the deforming of 40% or above.
- (ii) I have deformity in \_\_\_\_\_ part of the body for which I am unable to write for which I, may be allowed to take the help of Scribe.
- (iii) I have read/I am aware of the provisions for the candidates with disability issued by the CHSE, Odisha in the notification issued for form fill-up.

**UNDERTAKING**

**(B) I do hereby undertake that :**

- (i) I shall use only one scribe, except the specific need for language papers, viz, Telugu, Bengali, Urdu and Hindi and will not change the scribe unless there is explicit emergency. The explicit emergency will be explained by me in writing with documentary evidences, where ever available and is to be submitted with the Principal for examination and forwarding the same to the Controller of Examinations for necessary approval before examination.
- (ii) The Scribe approved by the Controller of Examinations will serve as helper writer to me till the end of the examination.
- (iii) The qualification of my scribe will be one step below my qualification. For any deviation, detected at any stage, I will be abided by the decision of the CHSE, Odisha.
- (iv) I shall be in constant touch with my Scribe and in case of emergency for any change of Scribe I will apply to the Controller of Examinations through the Principal with supporting evidences immediately. (e-mail : [coechseodisha@gmail.com](mailto:coechseodisha@gmail.com), Mob-9437144124).
- (v) I will not change my scribe without justifying the reasons in writing and without the prior approval of the Controller of Examinations failing which my paper will not be evaluated and be liable for cancellation.
- (vi) The identity proof, photograph and copies of Certificates and Mark Sheets in support of educational qualification of scribe with contact number are true, correct and signed by me. In case of any emergent need, I will submit the Identity proof, Photograph, copies of Certificates and Mark Sheets in support of educational qualification and contact number of the new scribe explaining the reasons thereof to the Principal for forwarding the same to the Controller of Examinations for necessary approval before sitting in the examination, failing which my answer scripts will not be evaluated and I will be solely responsible for the same.
- (vii) If the disability Certificate produced by myself is found to be fake at any point of time, appropriate legal action can be initiated against me and the Pass Certificate and Mark Sheet can be instantly cancelled.

**Contd...3**

// 3 //

- (viii) I am submitting separate application forms for reserve Scribe including the Scribe required for language paper, viz, Urdu, Telugu, Bengali and Hindi. (strike out if the point is not applicable)

Signature/Thumb impression  
of the applicant

Counter Signature of the Principal  
with date and Seal

Signature of Parents

- N.B.** Application form without the signature/thumb impression of the applicant, parents and counter signature of the Principal without seal signature in the undertaking will be out rightly rejected.

**PART-II (FOR SCRIBE/READER/LAB. ASST. )**

- 1** (i) Name of the Scribe/Reader/Lab. Asst.: \_\_\_\_\_  
(in capital letters)
- (ii) Permanent Address : \_\_\_\_\_  
: \_\_\_\_\_
- (iii) Present Address : \_\_\_\_\_  
: \_\_\_\_\_
- (iv) Identity Proof (Enclose with Application)  
Signed by physically disabled candidate & the Scribe \_\_\_\_\_
- (v) Educational Qualification (Enclose Certificates &  
Mark Sheets signed by both the physically disabled \_\_\_\_\_  
Candidate and the Scribe.
- (vi) Occupation : \_\_\_\_\_
- (vii) Contact Number : \_\_\_\_\_

Signature of the applicant

**2. LIST OF DOCUMENTS TO BE SUBMITTED BY THE SCRIBE/READER/LAB. ASST.**

- (1)  
(2)  
(3)

Contd...4/-

3. **UNDERTAKING BY THE SCRIBE/READER/LAB. ASST.**

I, hereby, undertake to serve as the Scribe, till the end of the examination of Sri/Ku. \_\_\_\_\_ who is appearing at the H.S. Examination, 2021 and I will abide by the rules of Examination of the Council as laid down for Scribe and examination.

Signature of the Scribe/Reader/Lab. Asst.

4. **CERTIFICATE OF THE PRINCIPAL OF THE COLLEGE FROM WHICH THE HANDICAPPED CANDIDATE HAS BEEN SENT UP.**

Certified that the application of the candidate for the facility of Scribe/Reader/Lab. Asst./taking compensatory time in Annual H.S. Examination, 2021 (strike out which is not applicable) with the requisite enclosers have been verified and found correct and genuine as per CHSE (O) **Notification No.** \_\_\_\_\_ **dt.** \_\_\_\_\_ (form fill-up notification for Ex-Regular students of Annual H.S. Examination, 2021) and No. 459 dt.25.01.2019 (Guide lines for conducting written examinations for persons with Benchmark Disabilities)

Counter Signature of the Principal  
with date and Seal

**N.B.** Application form without signature of the applicant, required documents of Scribe and signature of the Scribe in **Part-II** and counter signature and seal of the Principal in the certificate will be out rightly rejected.



**COUNCIL OF HIGHER SECONDARY EDUCATION, ODISHA  
PRAJNAPITHA, SAMANTAPUR, BHUBANESWAR -13.**

**GUIDELINES FOR CONDUCTING WRITTEN EXAMINATIONS FOR PERSONS WITH BENCHMARK DISABILITIES  
W.E.F. ANNUAL HIGHER SECONDARY EXAMINATION, 2019.**

**NOTIFICATION**

Bhubaneswar dated the 25<sup>th</sup> January, 2019.

No. EG-I-280/18/459/CHSE. This is notified for information of all the benchmark disabilities and all concerned that in pursuance of Govt. of India, Ministry of Social Justice & Empowerment, Department of Empowerment of Persons with Disabilities (Dibyangjan) Office Memorandum F.No. 34-02/2015-DD-III dated 29.08.2018, the CHSE, Odisha notification providing facility of Scribe/Reader/Lab. Asst. to the candidates with benchmark disability issued earlier vide No. EG-I-280/18-5274 dt.22.10.2018 has been modified as under for implementation w.e.f. Annual H.S. Examination, 2019. This notification will supercede all the notifications issued earlier in this regard

- (i) The facility of Scribe/Reader/Lab. Assistant should be allowed to any person with benchmark disability as defined under section 2 (r) of the RPwD Act, 2016 and has limitation in writing including that of speed if so desired by him/herd.

In case of persons with benchmark disabilities in the category of blindness. Locomotor disability (both arm affected-BA) and cerebral palsy, the facility of scribe/reader/Lab Assistant shall be given, if so desired by the person.

In case of other category of persons with benchmark disabilities, the provision of Scribe/Reader/Lab. Assistant can be allowed on production of a certificate to the effect that the person concerned has physical limitation to write and scribe is essential to write examination on his/her behalf, from the Chief Medical Officer/Civil Surgeon/Medical Superintendent of a Government health care institution as per proforma at APPENDIX-I.

**Contd...2/-**

- (ii) The candidate has to apply for own Scribe/Reader/Lab. Asst. and/or compensatory time at the time of form fill-up in the prescribed format and get approval of the Controller of Examinations.
- (iii) The Scribe selected by the candidate has to give an undertaking to the effect that he/she will serve as the helper writer till the end of the examination, except in emergency.
- (iv) If the original Scribe is not well conversant with the language papers, viz, Bengali, Urdu, Telugu and Hindi, application can be made for approval of a separate Scribe for these language papers only.
- (v) The candidate has also to give an undertaking to the effect that he/she will use only one Scribe, except the specific need for language papers, viz, Urdu, Telugu, Bengali, and Hindi and will not change the Scribe unless there is explicit emergency. To meet such emergency the application for change of Scribe is to be certified by the Principal of the concerned College and to be forwarded to the Controller of Examinations with the evidences for necessary approval.

The qualification of the Scribe should be one step below the qualification of the candidate taking Examination. The persons with benchmark disabilities opting for own Scribe/Reader/Lab. Asst. should submit the details of the own Scribe as per CHSE, Odisha proforma at ANNEXURE -'B'.

- (vi) The candidate is required to submit the Identity Proof with clear photograph of the Scribe and copies of Certificates and Mark Sheets in support of the educational qualification of the Scribe with his contact details including Mobile number. **All such documents are to be signed by the candidate, Scribe and countersigned by the Principal of the College.**
- (vii) The Principals may also identify Scribe/Reader/Lab. Asst to make panels at the College level as per requirement of their physically disabled examinees. Such panels must be approved by Controller of Examinations prior to the commencement of the Higher Secondary Examinations. In such instances, the candidates should be allowed to meet the Scribe two days before the examination so that the candidates get a chance to check and verify whether the Scribe is suitable or not. In case the Scribe is rejected, the candidate must state the valid reason of rejection in writing and submit to the Principal.



- (vii) In case the disability certificate produced by the candidate is found to be fake at any point of time, appropriate legal action will be initiated against the candidate and the pass Certificate and Mark Sheets awarded, if any, will be instantly cancelled.
  - (viii) The compensatory time should not be less than 20 minutes per hour of examination for persons, who are making use of Scribe/Reader/Lab. Asst. All the candidates with benchmark disabilities not availing the facility of Scribe may also be allowed additional time of 20 minutes per hour of examination.
  - (ix) Proper sitting arrangement should be made for the physically disabled candidates (preferably on the ground floor) prior to the commencement of examination to avoid confusion.
  - (x) A copy of the '**provision for providing facility to the candidates with benchmark disability**' be provided to the physically disabled candidates and their signature be taken on another copy of the '**provision for providing facility to the candidates with disability**' as a proof of intimation of the rules of CHSE, Odisha.
  - (xi) If any Scribe is used without approval of the Controller of Examinations, the candidate and the Principal concerned will be held responsible for violation of examination rules. Answer Scripts of such candidates will not be evaluated by the Council and the paper will be cancelled.
- N. B. :** The application form must be signed by the applicant. If he/she is not able to write, left hand thumb impression be put with countersignature of the Principal. For any candidate without fingers, his/her Parents/Legal Guardian can put the signature with counter signature of the Principal.

  
Controller of Examinations

**APPENDIX-I**

**Certificate regarding physical limitation in an examinee to write**

This is to certify that, I have examined Mr/Ms/Mrs. \_\_\_\_\_ (name of the candidate with disability), a person with \_\_\_\_\_ (nature and percentage of disability as mentioned 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

Chief Medical Officer/Civil Surgeon/Medical Superintendent of a  
Government health care institution  
Name & Designation

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-Prthopaedic specialist/PMR).