



**ITPO** | INDIA TRADE PROMOTION  
ORGANISATION  
A Government of India Enterprise

**INDIA TRADE PROMOTION ORGANISATION (ITPO)  
Pragati Bhawan, Pragati Maidan,  
New Delhi-110001 (INDIA)**

**Dated: 19.03.2019**

**N O T I C E**

**RECRUITMENT TO THE POST OF DEPUTY MANAGERS (VARIOUS CADRES) & SENIOR ASSISTANT  
(ELECTRICAL)**

The **Written Examination (Computer Based Test)** for the Recruitment to Deputy Managers (Various Cadres) & Senior Assistant (Electrical) are scheduled to be held on **27<sup>th</sup> & 28<sup>th</sup> March, 2019**

The link to download E-Admit Card for appearing in the Written Examination is uploaded on the website of ITPO ([www.indiatradefair.com](http://www.indiatradefair.com)). SMS and Emails to the candidates are also being sent for downloading E-Admit Cards.

The candidates are advised to carefully read the instructions given in the E-Admit Card before appearing in the Examination. In case of any discrepancy in E-Admit Card, candidates are advised to report the same at **Recruitment Help Desk Email: [ITPOEXAM2019@gmail.com](mailto:ITPOEXAM2019@gmail.com)** along with 2 passport size scanned photographs and scanned copy of documentary evidence/certificates, photo ID card etc. Also in case of any discrepancy the candidates are advised to bring the original documents for verification along a set of self-attested photocopy at the examination centre on the day of examination.

No candidate shall be permitted in the Exam.Center without carrying printout of E-Admit Card and ID Proof (in original) under any circumstances.

For any clarification, please feel free to contact the helpdesk at Email: [ITPOEXAM2019@gmail.com](mailto:ITPOEXAM2019@gmail.com). The candidates are advised to keep visiting ESIC website [www.indiatradefair.com](http://www.indiatradefair.com) for further updates/instructions in respect of above recruitment.

## **IMPORTANT INSTRUCTIONS FOR PWD CANDIDATES USING ASSISTANCE OF SCRIBE**

1. In accordance with Government of India, Ministry of Social Justice & Empowerment, Department of Empowerment of Persons with Disabilities (Divyangjan) O.M. No. 34-02/2015-DD-III dated 29th August, 2018 on the subject - Guidelines for conducting written examination for Persons with Benchmark Disabilities, the PwD candidates eligible for Scribe/ Reader/ Lab Assistant has discretion of opting for his own Scribe/Reader/Lab Assistant or request the Examination body for the same.
2. Further as per Para IV of the said OM, the facility of scribe/reader/lab assistant shall be given only to persons with benchmark disabilities in the category of blindness, locomotors disability both arm affected-BA and cerebral palsy, if so desired by the person. For 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 behalf, from the Chief Medical Officer/Civil Surgeon/Medical Superintendent of a Government health care institution as per prescribed proforma (Appendix-I of the said OM).
3. **In case the candidate has opted to bring his own Scribe/Reader/Lab Assistant, the qualification of the scribe should be one step below the minimum qualification criteria for the post.**
4. **In case, subsequently if it is found that the qualification of Scribe is not one step below the minimum qualification criteria for the post, the candidature of the candidate shall be liable to be summarily rejected.**
5. For eligible PwD candidates using their own Scribe in the above examination are required to submit 'Scribe Declaration Form (enclosed herewith)' on the day of examination at Examination Venue.
6. The candidates eligible for scribe will be allowed compensatory time of 20 minutes per hour in the examination on production of requisite certificate as mentioned in Para 2 above.

### **Important:**

**PwD candidates taking assistance of scribe and availing compensatory time will be required to submit requisite certificate as mentioned in Para 2 above at the time of Document Verification failing which their candidature will be liable to be cancelled.**

Dated: 19.03.2019

Sd/-  
**Competent Authority (ITPO)**

**SCRIBE DECLARATION FORM FOR RECRUITMENT TO DEPUTY  
Managers (VARIOUS CADRES) & SENIOR ASSISTANT  
(ELECTRICAL)**

**GUIDELINES REGARDING PERSONS WITH DISABILITIES**

Those candidates who are affected by cerebral palsy with loco-motor impairment and whose writing speed is affected can use own scribe at own cost during the online examination. In all such cases where a scribe is used, the following rules will apply:

1. Please ensure you are eligible to use a scribe as per the Government of India rules governing the recruitment of Persons with Disabilities. **In case the candidate opts for bringing his own Scribe, the qualification of the scribe should be one step below the minimum qualification criteria for the post.**
  2. In case, subsequently it is found that the qualification of Scribe is **not** one step below the minimum qualification criteria for the post, the candidature of the candidate shall liable to be summarily rejected.
  3. The candidate will have to arrange his own scribe at his own cost.
  4. The scribe can be from any academic discipline.
  5. Both, the candidate as well as the scribe, will have to give a suitable undertaking, in the prescribed format with passport size photograph of the scribe, confirming that the scribe fulfils all the stipulated eligibility criteria for a scribe as mentioned above. Further, in case it later transpires that she/he did not fulfill any of the laid-down eligibility criteria or suppressed material facts, the candidature of the applicant will stand cancelled, irrespective of the result of the examination.
  6. **Such candidate who uses a scribe shall be eligible for compensatory time of 20 minutes for every hour of the examination.**
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Conduct of computer-based test/examination for recruitment of Various posts in ITPO

**DECLARATION BY CANDIDATE WITH DISABILITY**

I \_\_\_\_\_ S/o,W/o,D/o \_\_\_\_\_

R/o \_\_\_\_\_  
\_\_\_\_\_

Roll Number: \_\_\_\_\_ for the examination for the post of  
\_\_\_\_\_ exam schedule on \_\_\_\_\_ session  
\_\_\_\_\_ hereby declare 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.

I do hereby undertake that qualification of my scribe is \_\_\_\_\_. In case,  
subsequently it is found that his qualification is not as declared by me and beyond my  
qualification, I shall forfeit my right to the post and claims relating thereto.

**DECLARATION BY SCRIBE/WRITER**

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 \_\_\_\_\_ (type of disability) candidate having Roll No.  
\_\_\_\_\_ for the examination for the post of  
\_\_\_\_\_ (Post Code: \_\_\_\_\_) exam scheduled on  
\_\_\_\_\_ and session \_\_\_\_\_.

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

Below Metric	Metric	10+2	Graduate	Post Graduate

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.

**Signature of Scribe**

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 Candidate with Disability**

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

**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-Prthopedic specialist/PMR)

**Letter of Undertaking for Using Own Scribe**

I \_\_\_\_\_, a candidate with \_\_\_\_\_ (name of the disability) appearing for the \_\_\_\_\_ (name of the examination) bearing Roll No. \_\_\_\_\_ at \_\_\_\_\_ (name of the centre) in the District \_\_\_\_\_, \_\_\_\_\_ (name of the State). My qualification is \_\_\_\_\_.

I do hereby state that \_\_\_\_\_ (name of the scribe) will provide the service of scribe/reader/lab assistant for the undersigned for taking the aforesaid examination.

I do hereby undertake that his qualification is \_\_\_\_\_. In case, subsequently it is found that his qualification is not as declared by the undersigned and is beyond my qualification, I shall forfeit my right to the post and claims relating thereto.

(Signature of the candidate with Disability)

Place:

Date: