

The West Bengal University of Teachers' Training, Education Planning and Administration



Department of Controller of Examinations

Application Form for Sightless/Physically Challenged /Physically Unfit Candidates

1. Name of the Applicant:
(in block letters)
2. Visual/ Physically Handicapped:
3. Name of the Examination:
4. Roll No. & Year of Examination:
(Photocopy of the Admit Card to be enclosed)
5. Name of the College:
6. Name of the Amanuensis:
(in block letters)
7. Name of the Examination Centre:
8. Application to be submitted in plain paper
to the Controller of Examinations:
9. Contact No.
10. The Application must be accompanied by THREE COPIES OF RECENT
PASSPORT SIZE PHOTOGRAPH OF THE Amanuensis.

Forwarded by the Principal/T.I.C./ O.I.C. of
the respective Institution.

Signature of the Applicant