THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING
Bikash Bhavan (2nd Floor,East Block), Bidhannagar, Kolkata-700091

Application Form for permission for only Extra Time for the Visually /Physically handicapped candidate for Madhyamik Pariksha (Secondary Examination)December-2026

To
The Secretary,
The West Bengal Council of Rabindra Open Schooling
Bikash Bhavan, Kolkata-700091

Attested Stamp size Photograph of the Examinee

Through the Study Centre .....
Sir,
I am a Physically handicapped/ Orthopedically indisposed candidate and my Roll .....No.....& Registration No is.....

My disability as confirmed by enclosed medical certificate is:
A) Poor Vision B) Orthopedic Indisposition C) Hearing Impairment D) Deafness & Dumbness E) Mental Disorder.
I shall appear at the ***Madhyamik Pariksha (Secondary Examination)December-2026*** and hence pray for extra time of 60 minutes as admissible under rule.
I am enclosing two (2) copies of my photograph and attested copy of medical certificate issued by appropriate authority for your kind consideration.

Yours faithfully,

.....
Signature of the Examinee with date

Name of the Examinee:.....

Registration Number:..... of.....Roll.....No.....

Address.....

.....

Enclosed:
1. **As stated**
2. **Attested copy of the Examinee's Admission Copy, Registration card & admit card.**

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Counter Signature of the Coordinator With seal and date

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For Office Use Only

THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING
Bikash Bhavan (2nd Floor,East Block), Bidhannagar, Kolkata-700091

To
The Coordinator
.....
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Attested Stamp size Photograph of the Examinee

Subject: Permission for extra time of 60 minutes beyond the scheduled time

Sri/Smt .....Roll..... No.....& Registration No.....
.....of.....
Madhyamik Pariksha (Secondary Examination)December-2026
Sir/Madam
With reference to your prayer dated.....on the above subject extra time of 60 minutes is granted in connection with the ***Madhyamik Pariksha (Secondaey Examination)December-2026.*** Please report to the Officer -in – Charge of the Examination Centre/Venues.....

Secretary

THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING
Bikash Bhavan (2nd Floor,East Block), Bidhannagar, Kolkata-700091

Application Form for permission for the help of Amanuensis with Extra Time for the Visually /Physically handicapped candidates for Madhyamik Pariksha (Secondary Examination)December-2026

To
The Secretary,
The West Bengal Council of Rabindra Open Schooling
Bikash Bhavan, Kolkata-700091

Attested Stamp size recent Photograph of the Examinee	Attested Stamp size recent Photograph of the Amanuensis (No-1)	Attested Stamp size recent Photograph of the Amanuensis (No-2)

Through the Study Centre .....

Sir,

I am a Visually handicapped/ Orthopedically indisposed candidate and my Roll.....No.....& Registration No. is.....**(attested copy of medical certificate issued by appropriate authority is enclosed herewith)**. I shall appear at the *Madhyamik Pariksha (Secondary Examination)December-2026* I am therefore, eligible to get the help of an Amanuensis with extra time of 60 minutes. I am enclosing two (2) copies of my photograph and my selected Amanuensis for your kind consideration.

Yours faithfully,

.....

L.T.I(Only for who unable to put signature) /Signature of the Examinee

1).Name.....
Name of the School of Amanuensis.....
Index No.....Student of Class..... as per enclosed certificate
.....

Signature of the Amanuensis

2).Name.....
Name of the School of Amanuensis.....
Index No.....Student of Class..... as per enclosed certificate
.....

Signature of the Amanuensis

Enclosed:

1. **As stated**
2. **Original Certificate along with attested copy of a recent photograph of Amanuensis from the H/M of the School of which the Amanuensis is a student.**
3. **Attested copy of the Examince's Registration card & admit card**

N.B. ***The selected Amanuensis must not be or must not had been a student of a higher class than IX for Secondary Examination***

Counter Signature of the Coordinator With seal and date

In case the information furnished by the Study Centre are incomplete or proved to be untrue, the Application will be rejected without any intimation by this Council.

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THE WEST BENGAL COUNCIL OF RABINDRA OPEN SCHOOLING
Bikash Bhavan (2nd Floor,East Block), Bidhannagar, Kolkata-700091

To
The Coordinator
_____.
_____

Attested Stamp size recent Photograph of the Examinee	Attested Stamp size recent Photograph of the Amanuensis (No-1)	Attested Stamp size recent Photograph of the Amanuensis (No-2)

Subject: Permission for Amanuensis and extra time of 60 minutes

Sri/Smt..... Roll .....No.....& Registration No..... *Madhyamik Pariksha (Secondary Examination)June- 2026*

Name of the Amanuensis 1)Sri/Smt.....2)Sri/Smt.....

Sir/Madam,

With reference to your prayer dated..... on the above subject Amanuensis with extra time of 60 minutes is granted in connection with the ***Madhyamik Pariksha (Secondary Examination) December-2026.*** Please report to the Officer -in -Charge of the Examination Centre .....

Secretary