

**Staff Selection Commission (NWR) Chandigarh**  
**F.No. E.12011/12/2022**  
**Skill Test for Combined Graduate Level Examination, 2021**

**Attention:** Candidates of CGL-2021 Examination seeking exemption from appearing in Skill Test (DEST) .

Candidates qualified in Tier-III of Combined Graduate Level Examination, 2021, who are 'Persons with Benchmark disability' and who claim to be permanently unfit to take the Typing Test because of Physical disability and seek exemption from appearing and qualifying in Typing Test are required to send scanned copies of following documents on email id [sscnwrgoi@gmail.com](mailto:sscnwrgoi@gmail.com) latest by **02-01-2023**.

(i) **Medical Certificate** seeking exemption in prescribed format (**Annexure XVI** of the notice of Examination) from the competent Medical Authority, i.e., the Civil Surgeon of a Government Health Care Institution

(ii) **Certificate of Disability** in the prescribed format as per **Annexure-XIII** to **Annexure-XV** of the notice of Examination, as applicable

(iii) Undertaking as per the format annexed to this notice.

2. Alternatively, the candidates may also report at the venue for Skill Test on 04/01/2023 & 05/01/2023 along with aforementioned documents (Original & Photocopy) for seeking exemption from Typing Test.

3. The candidates are required to produce all the aforesaid documents in original before the Commission at the time of Document Verification. If any candidate fails to produce the same during Document Verification, Commission would cancel the candidature of such candidate for this exam and such candidates will have no claim against the Commission's decision.

Staff Selection Commission(NWR)  
Chandigarh  
Dated-26/12/2022

UNDERTAKING

I \_\_\_\_\_, Roll No. \_\_\_\_\_ am a candidate of **CGL, 2021** Examination and would like to avail exemption from the requirement of appearing and qualifying in Skill test (DEST), in accordance with Para 13.12.1.4 of examination notice, as I am permanently unfit to take the typing test because of physical disability. I am herewith attaching a copy of requisite certificate in prescribed format (**annexure XVI**) of notice of examination, issued by competent medical authority i.e. a civil surgeon of a Government health care institution along with relevant medical certificate in prescribed format as per **annexure XIII** to **annexure XV** of the notice of examination.

I also undertake that I will produce all these documents in original during document verification before the Commission. If I fail to produce the same, the Commission may cancel my candidature for this examination and I will have no claim against the Commission's decision.

SIGNATURE.....

NAME OF CANDIDATE.....

ROLL NO.....

DATE.....