UCO BANK: RECRUITMENT OF LOCAL BANK OFFICERS - 2025-26

GUIDELINES REGARDING PERSONS WITH BENCHMARK DISABILITIES/SPECIFIED DISABILITIES USING THE SERVICES OF A SCRIBE

(This form will be collected during the examination)

The facility of Scribe / Reader would be allowed to candidates who are eligible to use the services of scribe and opted for the same in their online application form. The facility of scribe is meant for only those candidates with disabilities who have physical limitation to write including that of speed. In all such cases where a scribe is used, the following rules will apply:

- The scribe will be allowed to be used as per the guidelines issued vide Office Memorandum F. No. 16-110/2003-DD.III dated February 26, 2013 of Government of India, Ministry of Social Justice and Empowerment, Department of Disability Affairs, New Delhi and clarification issued by Government of India, Ministry of Finance, Department of Financial Services vide letter F. No. 3/2/2013-Welfare dated 26.04.2013 and F. No. 29-6/2019-DD-III dated 10.08.2022.
- The candidate will have to arrange his/ her own scribe at his/ her own cost.
- The scribe may be from any academic stream.
- 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, conforming that the scribe fulfils all the stipulated eligibility criteria for a scribe as mentioned above. Further, in case it later transpires that the candidate/scribe did not fulfill any of the laid down eligibility criteria or has suppressed any material facts, the candidature of the applicant will stand cancelled, irrespective of the result of the test/ examination.
- Wrong information about the candidate/ scribe in declaration form submitted at the time of online application or at the time of examination or at any stage would render the candidate and scribe being debarred either permanently or for a specified period of time for UCO Bank examinations.
- Those candidates who are eligible to use services of scribe shall be eligible for compensatory time of 20 minutes or otherwise advised for every hour of the examination, if they have opted for the same in their online application form.
- The scribe arranged by the candidate should not be a candidate himself/herself for the online examination. If violation is detected at any stage of the process, candidature of both, the candidate and the scribe will be cancelled for UCO Bank examinations.
- The scribe arranged by the candidate should not be a scribe to any other candidate in the same examination process. In the event of such appearance of the scribe, the candidature of both the candidates may be cancelled and the scribe may be debarred to appear as scribe for future UCO Bank examinations.
- Only candidates registered for compensatory time (at the time of online application) will be allowed such
 concessions since compensatory time given to candidates shall be system based, it shall not be possible for
 the test conducting agency to allow such time if he/ she is not registered for the same. Candidates not
 registered for compensatory time shall not be allowed such concessions.
- Any candidate who is not eligible to use scribe as per the guidelines referred to above, but uses scribe in the examination shall be disqualified to participate further in the engagement process. Any candidate who is using
 - services of scribe should ensure that he/she is eligible to use the services of scribe in the examination as per the above guidelines. Any candidate using the services of a scribe in violation of the above guidelines shall stand disqualified and can be removed from service without notice, if has already joined the Bank.
- For candidates availing scribe in accordance with OM F. No. 29-6/2019-DD-III dated 10.08.2022, shall be allowed scribe facility subject to production of a certificate at the time of online examination to the effect that person concerned has limitation to write and that scribe is essential to write examination on his/her behalf from competent medical authority of a Government healthcare institution as per Appendix I of the above mentioned OM. Such candidates shall also, upload their certificate while filling the application form.
- During the exam, at any stage, if it is found that scribe is independently answering the questions, the exam session will be terminated and candidate's candidature will be cancelled. The candidature of such candidates using the services of a scribe will also be cancelled if it is reported after the examination by the test administrator personnel that the scribe independently answered the questions. In such cases, the Candidate and scribe may also be debarred either permanently or for a specified period from all UCO Bank examinations.

Please fill up the DECLARATION and submit along with the call-letter.

DECLARATION

	eligible candidate for the Online Examination for
the Post of	in UCO Bank to be held on at (Time) and
Shri/Smt./Kum	eligible writer (scribe) for the eligible candidate, do hereby
declare that:-	
1. The scribe is identified by the candidate	at his/her cost and as per own choice.
2. The candidate has physical limitation	n to write including that of speed and he/she needs a writer (scribe) as
permissible under the Government	of India rules governing the recruitment of Persons with Benchmark
Disability / Specified Disability.	
3. Candidates with disabilities who hav	e physical limitation to write including that of speed shall be allowed
compensatory time of 20 minutes per	hour, if they have opted for the same in their online application form
whether availing the facility of scribe	or not.
4. In view of the importance of the	time element, the examination being of a competitive nature, the
candidate undertakes to fully satisfy	the Medical Officer of the Bank that there was necessity for use of a
scribe as he/she has physical limitati	on to write including that of speed by the disabilities as mentioned ir
guidelines regarding persons with be	enchmark disability/specified disability using the services of a scribe.
5. The candidate has ensured that the s	cribe is not a candidate for this process (UCO Bank - Rect. of Loca
Bank Officers - 2025-26).	
6. The scribe has ensured that he/she has	as not appeared/ is not appearing as a candidate in this process (UCC
Bank - Rect. of Local Bank Officers -	2025-26)
7. We declare that the scribe has not	acted/will not act as a scribe to any other candidate in the same
examination process.	
8. We understand that at any stage, if it	is found that scribe is independently answering the questions, the exam
session will be terminated and candid	dature will be cancelled. The candidature will also be cancelled if it is
reported after the examination by the	test administrator personnel that the scribe independently answered the
questions.	
9. We hereby declare that all the abo	ove statements made by us are true and correct to the best of our
knowledge and belief. We also under	rstand that in case it is detected at any stage of the process that we do
not fulfill the eligibility norms and/	or that the information furnished by us is incorrect/false or that we
have suppressed any material fact(s)	, the candidature of the applicant (both the candidate as well as scribe
in case he/she has appeared in the sar	ne examination) will stand cancelled, irrespective of the result of the
written test(s). If any of these shorte	comings is/are detected even after the candidate's appointment, his/he
	. In such circumstances, both signatories will be liable to crimina
prosecution.	
I, the candidate,	certify that I am eligible to use the services of a scribe as
(Name of the candidate) per the Govt. G	uidelines for conducting written examination of Persons with
Disability.	
I, the candidate fo	or this examination certify that I have ensured that the above scribe has
	not appearing for this Process (UCO Bank - Rect. of Local Bank
Officers - 2025-2	26).
I (Soribo	e) certify that I am not a candidate for this Process (UCO Bank - Rect.
	not solve the questions on behalf of the candidate.
of Local Bank Officers - 2025-20). I Will	not sorre the questions on benan of the candidate.
Signature of Candidate	Signature of Scribe

Given under are our signature and details:-

Details of the candidate:
Roll No.: Name
Scribe Details:
Mobile No.: Date of Birth (dd/mm/yyyy): Gender: M F Transgender
Name:

Photo of Scribe
Email_Id:
Father's Name:
Address 1
Address 1
Address 2
State:
Highest Educational Qualification:
Relationship with the candidate:
Scribe's ID Type: (Tick appropriate box)
Aadhar Card Driving License PAN Card Passport Voter ID Card
Other ID (Specify)
(Enter number of the selected ID below and attach the conv.)
(Enter number of the selected ID below and attach the copy) ID No.
I have gone through the relevant clause in the Advertisement regarding PwBD and Scribe candidates. I
declare and undertake that I would not answer/solve questions in the examination independently. I
understand that the candidate is liable to be debarred from the examination or future exams if it is found that I have answered the questions on my own. I am also liable to face legal actions if I indulge in malpractices
as a Scribe along with the candidate. I am not a candidate and I have not acted/will not act as scribe for any
other candidate for the same exam process.
Thumb Impression
Signature of the Scribe: of the Scribe
L

(Signature of Invigilator)

(Signature of Candidate)

APPENDIX- I

Certificate for person with specified disability covered under the definition of Section 2 (s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing.

This is to certify that, we have examined Mr/Ms/Mrs D/o, a resident of						
yrs, a person wi limitation which	th	_ (nature of disab ng capability owing	ility/condition), and to	state that he/she has ition, He / She requires		
	which is / are essen		•	etics, hearing aid (name examination with the		
This certificate is issued only for the purpose of appearing in written examinations conducted by recruitment agencies as well as academic institutions and is valid upto (it is valid for maximum period of six months or less as may be certified by the medical authority).						
Signature of Me	dical Authority					
(Signature & Name)	(Signature & Name)	(Signature & Name)	(Signature & Name)	(Signature & Name)		
Orthopedic/ PMR specialist	Clinical Psychologist/ Rehabilitation Psychologist/ Psychiatrist/ Special Educator	Neurologist (if available)	Occupational therapist (if available)	Other Expert, as nominated by the Chairperson (if any)		

Name of Government Hospital / Health Care Centre with Seal

(Signature & Name)

Chief Medical Officer / Civil Surgeon / Chief District Medical Officer

Chairperson

Place:	
Date:	

(The prescribed proforma shall be subject to amendment from time to time as per Government of India Guidelines)

APPENDIX II

Letter of Undertaking by the person with specified disability covered under the definition of Section 2 (s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing

I,, a candidate with disability/condition) appearing for the bearing Roll No at , (name of the State). My educational qualification	(name of the examination) (name of the centre) in the District
2. I do hereby state that (r service of scribe for the undersigned for taking the aforement	name of the scribe) will provide the tioned examination.
3. I do hereby undertake that his/her qualification is subsequently it is found that his qualification is not as declare my qualification. I shall forfeit my right to the post or ce relating thereto.	ed by the undersigned and is beyond
Place: Date:	(Signature of the candidate)
(The prescribed proforma shall be subject to amendment from India Guidelines)	n time to time as per Government of