

# **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