

FORM-DYSLEXIC-2

***CERTIFICATE TO BE PRODUCED BY DYSLEXIC CANDIDATE
FROM THE PRINCIPAL OF THE SCHOOL/COLLEGE LAST ATTENDED**

Testimonial

Date: _____

Name of the candidate:

Date of Birth:

Name and Address of the School/College:

Recent PP size
photograph of the
candidate.

It is Certified that Shri/Smt/Kum _____ son/daughter of
_____ of _____ village/town
passed his/her Class XII from this school and as per records, availed concession under dyslexic category.

Signature with seal:

** A candidate passing Class XII or equivalent through open school system or in private mode may submit the certificate to this effect from the competent authority in the board certifying the concessions availed under dyslexia.*

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