

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:

Passport
size
Photograph
of the
Candidate

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.*