

**THE GAUHATI HIGH COURT AT GUWAHATI**  
(High Court of Assam, Nagaland, Mizoram and Arunachal Pradesh)

**NOTIFICATION**

No.HC.V-37/2012/১২৭ /Estt.

Dated, Guwahati, the 5<sup>th</sup> June, 2017

WHEREAS, vide Notification No. HC.VII-04/2009/980/A dtd. 2.2.2009, the Gauhati High Court has been pleased to reserve 3% of the vacancies for disabled persons as per Section 33 of "The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995" in all the direct recruitment made by the Gauhati High Court.

WHEREAS, Section 32(a) of "The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995" mandates to identify posts for reservation for the persons suffering from (i) blindness or low vision; (ii) hearing impairment and (iii) locomotor disability or cerebral palsy.

NOW, THEREFORE, as per physical requirement and considering the posts suitable to be held by persons with disability, Hon'ble the Chief Justice, in exercise of the powers conferred under Article 229 of the Constitution of India, has been pleased to identify the following posts for appointment of persons with disability in the Principal Seat of the Gauhati High Court.

Sl. No.	Category of post	Name of the post	Categories of disabled suitable for the job
1.	Class-III (Ministerial)	Jr. Grade Translator	PD, OL, BL, OA
2.		Judicial Assistant	PB, PD, BL, OL, OA
3.		Computer Assistant	PB, PD, BL, OL, OA
4.	Class-IV	Court Attendant	PB, PD, OL, OA
5.		Lawn Attendant	PB, PD, OL
6.		Farash	PB, PD, OA, OL
7.		Lift Operator	PB, PD, OL, OA
8.		Sanitation Attendant	PB, PD, OL, OA

[Abbreviations used: OA-One Arm affected, OL- One leg affected, BL-Both leg affected but not arms, PB-Partially blind, PD-Partially deaf]

Further, as per Section 2(t) of the aforesaid Act, only such persons would be eligible for reservation in services/posts mentioned above, who suffer from minimum 40 percent of relevant disability. The upper age limit for direct recruitment of PWD candidate in this Registry shall be as per the State Government Rules and the PWD candidates shall be exempted from payment of examination fees. A person, who wants to avail the benefit of reservation of a PWD candidate, would have to submit a Disability Certificate issued by a competent authority in the format given herewith at **Annexure-I**.

By Order,

১০/১

**REGISTRAR GENERAL**

**Copy to:-**

1. The L.R.-cum-Commissioner and Secretary to the Govt. of Assam, Judl. Deptt., Dispur, Guwahati-6 for information.
2. The Registrar (Vig./Admn./Judl./Estt.), Gauhati High Court, Guwahati.
3. The Registrar-cum-Principal Secretary of Hon'ble the Chief Justice, Gauhati High Court, Guwahati.
4. The Registrar, Gauhati High Court, Kohima Bench, Kohima/Aizawl Bench, Aizawl/Itanagar Permanent Bench, Naharlagun.
5. The Joint Registrar (\_\_\_\_\_), Gauhati High Court, Guwahati.
6. The Deputy Registrar, \_\_\_\_\_, Gauhati High Court, Guwahati
7. The Assistant Registrar \_\_\_\_\_, Gauhati High Court, Guwahati.
8. The Secretary to Hon'ble the Chief Justice, Gauhati High Court, Guwahati.
9. The Special Officer, Translation Wing, Gauhati High Court, Guwahati.
10. The Librarian-cum-Research Officer, Gauhati High Court, Guwahati.
11. The Pvt. Secretary to Hon'ble Mr./Mrs. Justice \_\_\_\_\_, Gauhati High Court, Guwahati.
12. The System Analyst, Gauhati High Court, Guwahati. He is requested to upload this Notification in the website of the Gauhati High Court.
13. The Administrative Officer (Judicial) \_\_\_\_\_, Gauhati High Court, Guwahati.
14. The Chief Security Officer, Gauhati High Court, Guwahati.
15. The Court Officer-I & II, Gauhati High Court, Guwahati.
16. The CA to the Registrar General/Registrar (Vig./Admn./Judl.), Gauhati High Court, Guwahati.
17. The Order File.

  
**REGISTRAR GENERAL**

05-06-17  
S/16/17

ANNEXURE I

NAME & ADDRESS OF THE INSTITUTE / HOSPITAL

Certificate No. \_\_\_\_\_

Date \_\_\_\_\_

DISABILITY CERTIFICATE

Recent Photograph  
of the candidate  
showing the  
disability duly  
attested by the  
Chairperson of the  
Medical Board.

This is certified that Shri / Smt / Kum \_\_\_\_\_  
son/wife/daughter of Shri \_\_\_\_\_ age \_\_\_\_\_  
sex \_\_\_\_\_ identification mark(s) \_\_\_\_\_ is suffering from  
permanent disability of following category:

A. Locomotor or cerebral palsy:

- (i) BL-Both legs affected but not arms.
- (ii) BA-Both arms affected (a) Impaired reach  
(b) Weakness of grip
- (iii) BLA-Both legs and both arms affected
- (iv) OL-One leg affected (right or left) (a) Impaired reach  
(b) Weakness of grip  
(c) Ataxic
- (v) OA-One arm affected (a) Impaired reach  
(b) Weakness of grip  
(c) Ataxic
- (vi) BH-Stiff back and hips (Cannot sit or stoop)
- (vii) MW-Muscular weakness and limited physical endurance.

B. Blindness or Low Vision:

- (i) B-Blind
- (ii) PB-Partially Blind

C. Hearing impairment:

- (i) D-Deaf
- (ii) PD-Partially Deaf

(Delete the category whichever is not applicable)

2. This condition is progressive / non-progressive / likely to improve / not likely to improve. Re-assessment of this case is not recommended / is recommended after a period of \_\_\_\_\_ years \_\_\_\_\_ months.\*

3. Percentage of disability in his/her case is ..... percent.

4. Sh./Smt./Kum.....meets the following physical requirements for discharge of his/her duties:-

- |  |        |
|--|--------|
| (i) F-can perform work by manipulating with fingers. | Yes/No |
| (ii) PP-can perform work by pulling and pushing.     | Yes/No |
| (iii) L-can perform work by lifting.                 | Yes/No |
| (iv) KC-can perform work by kneeling and crouching.  | Yes/No |
| (v) B-can perform work by bending.                   | Yes/No |
| (vi) S-can perform work by sitting.                  | Yes/No |
| (vii) ST-can perform work by standing.               | Yes/No |
| (viii) W-can perform work by walking.                | Yes/No |
| (ix) SE-can perform work by seeing.                  | Yes/No |
| (x) H-can perform work by hearing/speaking.          | Yes/No |
| (xi) RW-can perform work by reading and writing.     | Yes/No |

(Dr. \_\_\_\_\_)  
Member  
Medical Board

(Dr. \_\_\_\_\_)  
Member  
Medical Board

(Dr. \_\_\_\_\_)  
Chairperson  
Medical Board

Countersigned by the  
Medical Superintendent / CMO/Head of  
Hospital (with seal)

\*Strike out which is not applicable.