

ALL INDIA COUNCIL FOR TECHNICAL EDUCATION

Common Management Admissions Test (CMAT)

Scribe Undertaking by Candidate

Name of Examination : CMAT

Date of Examination :

CMAT Exam Centre Name :

Name of Candidate :

CMAT Roll No. of the
Candidate :

Date of Birth of Candidate :

Name of Scribe :

Address of Scribe :

I, _____ son/daughter of _____,
resident of Village/Town/City _____, district _____ state _____,
holding PD certificate dated -----(copy enclosed) hereby declare that I have met
Shri/ Miss/Mrs -----on -----and I am fully satisfied and
convey my willingness to accept him/her as my scribe for the CMAT test to be held as per date
and centre mentioned above .

(Signature of the Candidate)