



CONSORTIUM OF NATIONAL LAW UNIVERSITIES

Reg.No:DRB1/SOR/707/2018-2019.

NATIONAL LAW SCHOOL OF INDIA UNIVERSITY

Post Bag No.7201, Nagarbhavi, Bengaluru-560072 Karnataka, India

Date: 29.07.2024

NOTIFICATION: GUIDELINES FOR CONDUCTING WRITTEN EXAMINATION OF PERSONS WITH BENCHMARK DISABILITIES/ PERSONS WITH DISABILITIES (“PWDS”)/SPECIALLY ABLED PERSONS (“SAPS”) AS PER SECTION 2(r) AND 2(s) OF THE RIGHTS OF PERSONS WITH DISABILITIES ACT, 2016

This guideline aims to establish a comprehensive policy for conducting CLAT examination 2025 for candidates with benchmark disabilities and disabilities as per sections 2(r) and 2 (s) of the Rights of Persons with Disabilities Act, 2016 (RPwD Act, 2016). This guideline is prepared in line with the guidelines issued by Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment, Government of India on 29th August 2018 and 10th August 2022 respectively. The purpose of this guideline is to ensure uniform practice and equal access and opportunities for all candidates, especially Persons with Benchmark Disabilities (PwBD), Persons with Disabilities (PWD), and Specially Abled Persons (SAPS) during the conduction of CLAT 2025.

1. These guidelines shall apply to candidates who belong to;
 - 1.1. The category ‘Persons with benchmark disabilities’ (PwBD) as defined under section 2(r) (**refer to Annexure I**) and
 - 1.2. the persons with specified disabilities covered under the definition of Section 2(s) (**refer to Annexure I**) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing.
2. **Compensatory Time:** Compensatory time of 40 extra minutes shall be granted to the eligible candidates as per the below criteria;
 - 2.1. The candidates appearing for the CLAT 2025 who are ‘Persons with Benchmark Disability’ as defined in section 2(r) are entitled to compensatory time (extra time) of 40 (forty) minutes for the two-hour CLAT examination. The total time provided to such candidates will be 2 (two) hour 40 (forty) minutes.
 - 2.2. In case of ‘persons with specified disabilities’ covered under the definition of Section 2(s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the



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said Act, i.e. persons having less than 40% disability and having difficulty in writing, the facility of compensatory time as mentioned in point (2) above i.e., extra 40 minutes shall be granted solely to those having difficulty in writing subject to production of a certificate to the effect that person concerned has limitation to write and that scribe is essential to write examination on his/her behalf from the competent medical authority of a Government healthcare institution as per proforma at **APPENDIX-I** as mentioned in the guideline issued by Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment on 10th August 2022.

- 2.3.** The medical authority for the purpose of certification as mentioned in point (2.2) above should be a multi-member authority comprising the following: -
- i. Chief Medical officer/Civil Surgeon/Chief District Medical Officer as the Chairperson
 - ii. Orthopaedic/PMR specialist
 - iii. Neurologist, if available
 - iv. Clinical Psychologist/Rehabilitation Psychologist/ Psychiatrist/Special Educator
 - v. Occupational therapist, if available
 - vi. Any other expert based on the condition of the candidate as may be nominated by the Chairperson.

(* the Chief Medical Officer/Civil Surgeon/Chief District Medical Officer may make full efforts for inclusion of neurologists, occupational therapist from the nearest District or the Medical College/Institute, if the same is not available in the district).

- 3. Facility of Scribe/Reader:** The facility of Scribe/Reader shall be allowed to the eligible candidates as per the below mentioned criteria;
- 3.1.** Any person with benchmark disability as defined under section 2(r) of the RPwD Act, 2016 and has limitation in writing including that of speed if so desired by him/her.
- 3.2.** In case of persons with benchmark disabilities in the category of blindness, locomotor disability (both arm affected-BA) and cerebral palsy,
- 3.3.** In case of other category of persons with benchmark disabilities, the provision of scribe/reader can be allowed on production of a certificate to the effect that the person concerned has physical limitation to write, and scribe is essential to write examination on his behalf, from the Chief Medical Officer/Civil Surgeon/ Medical Superintendent of a Government health care institution as per proforma at **APPENDIX-I**.



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4. Mode of Scribe/Reader Appointment and Qualification of Scribe

4.1. The candidate shall have the discretion of opting for his own scribe/reader or request the CLAT Consortium for the same.

4.2. The Consortium shall also identify the scribe/reader to make panels at the District/Division/State level as per the requirements of the examination.

4.3. If the candidate is opting for Consortium identified scribe/reader, candidates shall be allowed to meet the scribe/reader two days before the examination to enable the candidates to check and verify the suitability of the scribe/reader.

4.4. If the candidate is allowed to bring his/her own scribe/reader, the qualification of the scribe should be one step below the qualification of the candidate taking examination. i.e.,

- i. For **UG CLAT** – The scribe should not have completed more than the 11th grade. The scribe should not be currently enrolled in the 12th grade or higher. The scribe must not be affiliated to any test-preparatory organisation or examination coaching centre.
- ii. For **PG CLAT** – The scribe should not have completed more than the 12th grade. The scribe should not be a law student, and must not be affiliated to any test-preparatory organisation or examination coaching centre.

4.5. The person opting for own scribe should submit details of the own scribe as per proforma at **APPENDIX-II**.

4.6. In case of emergencies, the consortium and the test centres shall be flexible in accommodating the scribe.

5. **Use of Aids and Assistive Devices:** The candidate shall be allowed to use aids and assistive devices such as prosthetics & orthotics, hearing aid as mentioned in para 2 of the certificate issued by medical authority as per **APPENDIX-I**.

6. The Consortium shall also provide appropriate support to the eligible candidates, on a case-by-case basis, in order to complete CLAT 2025 successfully. In the event any such candidate requires any support in this regard, they may contact the Consortium in the manner that the Consortium shall publish.



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*All queries in of Persons with Benchmark Disabilities/ Persons with Disabilities/ Specially Abled Persons as per Section 2(r) and 2(s) of the Rights of Persons with Disabilities Act, 2016 with respect to the CLAT (2025) examination can be addressed to the nodalofficer-pwd@consortiumofnlus.ac.in.

Sd/-
PRESIDENT, CONSORTIUM OF NLUs



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APPENDIX I

Certificate for person with specified disability covered under the definition of Section 2 (s) of the RPwD Act, 2016 but not covered under the definition of Section 2(r) of the said Act, i.e. persons having less than 40% disability and having difficulty in writing.

1. This is to certify that, we have examined Mr/Ms/Mrs (name of the candidate), S/o /D/o, a resident of(Vill/PO/PS/District/State), aged yrs, a person with (nature of disability/condition), and to state that he/she has limitation which hampers his/her writing capability owing to his/her above condition. He/she requires support of scribe for writing the examination.
2. The above candidate uses aids and assistive device such as prosthetics & orthotics, hearing aid (name to be specified) which is /are essential for the candidate to appear at the examination with the assistance of scribe.
3. This certificate is issued only for the purpose of appearing in written examinations conducted by recruitment agencies as well as academic institutions and is valid upto _____ (it is valid for maximum period of six months or less as may be certified by the medical authority)

Signature of medical authority

(Signature & Name)	(Signature & Name)	(Signature & Name)	(Signature & Name)	(Signature & Name)
Orthopedic / PMR specialist	Clinical Psychologist/ Rehabilitation Psychologist/ Psychiatrist / Special Educator	Neurologist (if available)	Occupational therapist (if available)	Other Expert, as nominated by the Chairperson (if any)
(Signature & Name)				
Chief Medical Officer/Civil Surgeon/Chief District Medical Officer.....Chairperson				

Name of Government Hospital/Health Care Centre with Seal

Place:

Date:



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APPENDIX II

Letter of Undertaking for availing the Scribe Facility

I, a candidate with _____ (name of the disability),
appearing for the _____
(name of the examination bearing the Registration ID _____ at
_____ (name of the centre in the
District _____,
[name of the State]).

My qualification is _____

I do hereby state that I am making my own arrangements for a scribe / reader for taking the
aforesaid examination. The scribe/reader's name and qualification is (Name)
_____ and (qualification) _____-

In the event it is found that his/her/their qualification is not as declared by the undersigned and
is beyond my qualification, I shall forfeit my right to be admitted to the programme that I have
applied for, and all claims relating thereto.

(Signature of the candidate with Disability)

Place:

Date:



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APPENDIX III

Scribe Declaration Form (To be submitted by the Scribe in case the Scribe has been arranged by the Candidate)

I, Mr./Ms./Mx. _____ son/daughter
of _____
resident _____ have
consented to be the scribe for _____ son/daughter
of _____ resident of

Admit Card Number _____

I hereby declare that I comply with the preconditions and I will not, directly or indirectly, help the candidate in answering any question in the CLAT 202 examination, apart from reading out the questions and marking/clicking the answers as per the direction of the candidate.

Place: _____ Date: _____

(Signature of the Scribe)



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ANNEXURE-I

Below given are the relevant provisions in relation to Section 2(r) Rights of Persons with Disabilities Act, 2016.

- **Section 2(r)** “person with benchmark disability” means a person with not less than forty per cent. of a specified disability where specified disability has not been defined in measurable terms and includes a person with disability where specified disability has been defined in measurable terms, as certified by the certifying authority;
- **Section 2(s)** “person with disability” means a person with long term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders his full and effective participation in society equally with others;
- **Section 2 (zc)** “specified disability” means the disabilities as specified in the Schedule;

THE SCHEDULE

[See clause (zc) of section 2]

SPECIFIED DISABILITY

1. Physical disability.—

- A. Locomotor disability (a person’s inability to execute distinctive activities associated with movement of self and objects resulting from affliction of musculoskeletal or nervous system or both), including—
- (a) “leprosy cured person” means a person who has been cured of leprosy but is suffering from—
- (i) loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifest deformity;
 - (ii) manifest deformity and paresis but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity;
 - (iii) extreme physical deformity as well as advanced age which prevents him/her from undertaking any gainful occupation, and the expression "leprosy cured" shall construed accordingly;
- (b) “cerebral palsy” means a Group of non-progressive neurological condition affecting body movements and muscle coordination, caused by damage to one or more specific areas of the brain, usually occurring before, during or shortly after birth;
- (c) “dwarfism” means a medical or genetic condition resulting in an adult height of 4 feet 10 inches (147 centimeters) or less;
- (d) “muscular dystrophy” means a group of hereditary genetic muscle disease that weakens the muscles that move the human body and persons with multiple dystrophy have incorrect and missing information in their genes, which prevents them from making the proteins they need



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for healthy muscles. It is characterised by progressive skeletal muscle weakness, defects in muscle proteins, and the death of muscle cells and tissue;

- (e) “acid attack victims” means a person disfigured due to violent assaults by throwing of acid or similar corrosive substance.

B. Visual impairment—

- (a) “blindness” means a condition where a person has any of the following conditions, after best correction—

- (i) total absence of sight; or
- (ii) visual acuity less than 3/60 or less than 10/200 (Snellen) in the better eye with best possible correction; or
- (iii) limitation of the field of vision subtending an angle of less than 10 degree.

- (b) “low-vision” means a condition where a person has any of the following conditions, namely:

- (i) visual acuity not exceeding 6/18 or less than 20/60 upto 3/60 or upto 10/200 (Snellen) in the better eye with best possible corrections; or
- (ii) limitation of the field of vision subtending an angle of less than 40 degree up to 10 degrees.

C. Hearing impairment—

- (a) “deaf” means persons having 70 DB hearing loss in speech frequencies in both ears;
- (b) “hard of hearing” means person having 60 DB to 70 DB hearing loss in speech frequencies in both ears;

- D. “speech and language disability” means a permanent disability arising out of conditions such as laryngectomy or aphasia affecting one or more components of speech and language due to organic or neurological causes.

2. Intellectual disability, a condition characterised by significant limitation both in intellectual functioning (reasoning, learning, problem solving) and in adaptive behaviour which covers a range of every day, social and practical skills, including—

- (a) “specific learning disabilities” means a heterogeneous group of conditions wherein there is a deficit in processing language, spoken or written, that may manifest itself as a difficulty to comprehend, speak, read, write, spell, or to do mathematical calculations and includes such conditions as perceptual disabilities, dyslexia, dysgraphia, dyscalculia, dyspraxia and developmental aphasia;
- (b) “autism spectrum disorder” means a neuro-developmental condition typically appearing in the first three years of life that significantly affects a person's ability to communicate, understand relationships and relate to others, and is frequently associated with unusual or stereotypical rituals or behaviours.



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3. Mental behaviour,— "mental illness" means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognise reality or ability to meet the ordinary demands of life, but does not include retardation which is a condition of arrested or incomplete development of mind of a person, specially characterised by subnormality of intelligence.
4. Disability caused due to—
 - (a) chronic neurological conditions, such as—
 - (i) "multiple sclerosis" means an inflammatory, nervous system disease in which the myelin sheaths around the axons of nerve cells of the brain and spinal cord are damaged, leading to demyelination and affecting the ability of nerve cells in the brain and spinal cord to communicate with each other;
 - (ii) "parkinson's disease" means a progressive disease of the nervous system marked by tremor, muscular rigidity, and slow, imprecise movement, chiefly affecting middle-aged and elderly people associated with degeneration of the basal ganglia of the brain and a deficiency of the neurotransmitter dopamine.
 - (b) Blood disorder—
 - (i) "haemophilia" means an inheritable disease, usually affecting only male but transmitted by women to their male children, characterised by loss or impairment of the normal clotting ability of blood so that a minor wound may result in fatal bleeding;
 - (ii) "thalassemia" means a group of inherited disorders characterised by reduced or absent amounts of haemoglobin.
 - (iii) "sickle cell disease" means a hemolytic disorder characterised by chronic anemia, painful events, and various complications due to associated tissue and organ damage; "hemolytic" refers to the destruction of the cell membrane of red blood cells resulting in the release of hemoglobin.
5. Multiple Disabilities (more than one of the above specified disabilities) including deaf blindness which means a condition in which a person may have combination of hearing and visual impairments causing severe communication, developmental, and educational problems.
6. Any other category as may be notified by the Central Government.