Your Institute Name & Logo

OMR ANSWER SHEET

NAME

INSTRUCTIONS FOR FILLING THE SHEET

1. This sheet should not be folded or crushed.
2. Use only blue/ black ball point pen to fill the circles.
3. Use of pencil is strictly prohibited.
4. Circles should be darkened completely and properly.
5. Cutting and erasing on this sheet is not allowed.
6. Do not use any stray marks on the sheet.
7. Do not use marker or white fluid to hide the mark.

WRONG METHODS **CORRECT METHOD**

Name .....

Batch.....

Date...../...../.....

ROLL NO. / MOBILE NO.

TEST ID

1	A	B	C	D	11	A	B	C	D
2	A	B	C	D	12	A	B	C	D
3	A	B	C	D	13	A	B	C	D
4	A	B	C	D	14	A	B	C	D
5	A	B	C	D	15	A	B	C	D
6	A	B	C	D	16	A	B	C	D
7	A	B	C	D	17	A	B	C	D
8	A	B	C	D	18	A	B	C	D
9	A	B	C	D	19	A	B	C	D
10	A	B	C	D	20	A	B	C	D

21	A	B	C	D	31	A	B	C	D
22	A	B	C	D	32	A	B	C	D
23	A	B	C	D	33	A	B	C	D
24	A	B	C	D	34	A	B	C	D
25	A	B	C	D	35	A	B	C	D
26	A	B	C	D	36	A	B	C	D
27	A	B	C	D	37	A	B	C	D
28	A	B	C	D	38	A	B	C	D
29	A	B	C	D	39	A	B	C	D
30	A	B	C	D	40	A	B	C	D

41	A	B	C	D	46	A	B	C	D
42	A	B	C	D	47	A	B	C	D
43	A	B	C	D	48	A	B	C	D
44	A	B	C	D	49	A	B	C	D
45	A	B	C	D	50	A	B	C	D