

# INSTRUCTIONS FOR MARKING ON OMR ANSWER SHEET

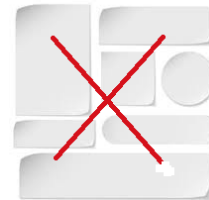
- ❑ Use black or blue ball point pen to fill the details in the boxes and bubbles.



- ❑ Fill all details in the boxes and dark bubbles carefully. Darken the bubbles completely. Don't put a tick mark or a cross mark where it is specified that you have to fill the bubbles completely. Half-filled or over-filled bubbles will not be read by the software



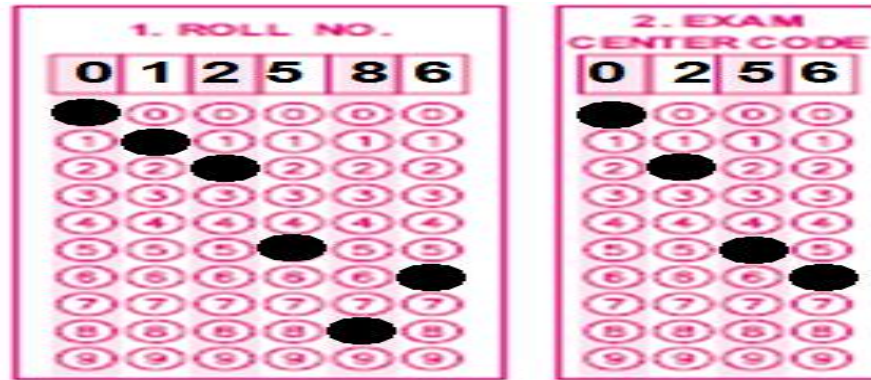
- ❑ Don't use blade, fluid/Eraser and stickers on the OMR sheet.



- ❑ Do not fold the Answer Sheet and do not make any stray marks on this Sheet.



- ❑ Fill the bubbles completely. Half-filled or over-filled bubbles will not be readable in scanning.



- ❑ Never use pencils to mark your answers as they might not get recognized by the scanner.





- 6 boxes are given for filling candidate roll no., fill candidate roll no. in the box of Roll No. and dark concern bubbles.
- 4 boxes are given for filling exam center code, fill exam center code in the box of EXAM CENTER CODE and dark concern bubbles.
- 7 boxes are given for filling question booklet number, fill question booklet no. in boxes and dark concern bubbles.
- 1 box is given for filling question paper set, fill question paper set & dark concern bubble.
- Please ensure that all details are filled correctly and sharply on OMR Sheet.

1. ROLL NO.

0	1	2	5	8	6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Before Filling details

2. EXAM CENTER CODE

0	2	5	6
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
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<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Exam Center Code

3. QUESTION BOOKLET NUMBER

0	1	2	5	4	5	4
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<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Question Booklet No.

4. QUESTION PAPER SET

C
SET <input type="radio"/> (A)
SET <input type="radio"/> (B)
SET <input checked="" type="radio"/>

Question paper Set