

OMR ANSWER SHEET

USE BLACK/BLUE BALL POINT PEN ONLY

Original copy

NAME OF THE CANDIDATE

FATHER'S NAME

Ph.D. Entrance 2024

KEY

SUBJECT NAME FOR Ph.D.

Public Health

Roll No.									
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Question Booklet Series
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B <input type="radio"/>
C <input type="radio"/>
D <input type="radio"/>



OMR ANSWER SHEET NO.

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[Handwritten Signature]
Signature of the Candidate

[Handwritten Signature]
Signature of the Invigilator with Date