

OMR ANSWER SHEET

USE BLACK/BLUE BALL POINT PEN ONLY

ORIGINAL COPY

NAME OF THE CANDIDATE

FATHER'S NAME

PROGRAMME NAME / SUBJECT NAME

Social Work

Roll No.

Q. Booklet No.

Paper Code

Question
Booklet
Series

A

244805



OMR ANSWER SHEET NO.

01	A	☒	C	D
02	☒	B	C	D
03	A	B	☒	D
04	A	B	☒	D
05	A	B	C	☒
06	A	☒	C	D
07	A	☒	C	D
08	A	B	☒	D
09	A	B	C	☒
10	A	B	C	☒
11	☒	B	C	D
12	A	B	☒	D
13	A	☒	C	D
14	A	B	C	☒
15	A	B	☒	D
16	☒	B	C	D
17	A	B	☒	D
18	A	☒	C	D
19	A	☒	C	D
20	A	B	C	☒
21	☒	B	C	D
22	A	☒	C	D
23	A	B	☒	D
24	A	☒	C	D
25	A	B	C	☒
26	A	B	☒	D
27	A	B	C	☒
28	A	B	☒	D
29	☒	B	C	D
30	A	B	☒	D
31	A	☒	C	D
32	A	B	C	☒
33	A	B	☒	D
34	A	☒	C	D
35	A	B	C	☒
36	☒	B	C	D
37	A	☒	C	D
38	☒	B	C	D
39	☒	B	C	D
40	A	B	☒	D
41	A	☒	C	D
42	A	B	C	☒
43	A	☒	C	D
44	A	B	C	☒
45	A	☒	C	D
46	☒	B	C	D
47	A	☒	C	D
48	A	B	☒	D
49	A	B	☒	D
50	A	☒	C	D
51	A	B	☒	D
52	A	☒	C	D
53	A	B	C	☒
54	☒	B	C	D
55	A	☒	C	D
56	A	B	☒	D
57	A	☒	C	D
58	A	B	☒	D
59	A	B	☒	D
60	☒	B	C	D
61	A	☒	C	D
62	A	B	☒	D
63	A	B	☒	D
64	A	B	☒	D
65	A	☒	C	D
66	☒	B	C	D
67	A	B	C	☒
68	A	☒	C	D
69	A	☒	C	D
70	A	B	☒	D
71	☒	B	C	D
72	A	B	C	☒
73	A	☒	C	D
74	A	B	☒	D
75	A	B	C	☒
76	A	B	☒	D
77	A	B	C	☒
78	A	B	☒	D
79	☒	B	C	D
80	A	B	C	☒
81	☒	B	C	D
82	☒	B	C	D
83	A	☒	C	D
84	A	B	☒	D
85	A	☒	C	D
86	A	☒	C	D
87	☒	B	C	D
88	A	B	☒	D
89	A	☒	C	D
90	A	B	☒	D
91	A	B	☒	D
92	☒	B	C	D
93	☒	B	C	D
94	A	B	C	☒
95	A	☒	C	D
96	☒	B	C	D
97	A	B	☒	D
98	A	☒	C	D
99	A	B	C	☒
100	A	☒	C	D

Signature of the Candidate

Signature of the Invigilator with Date