

Center :		Room No. :	No. of Candidates Registered :	Date of Examination :
Time of Examination :	Subject :		Paper :	Paper Code :

S.No	HallTicket Number	Name of Candidate	Medium	Answer Booklet Number	Additional		Signature
					1	2	
1							
2							
3							
4							
5							
6							
7							
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11							
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20							
21							
22							
23							

Total No Candidates Alloted(if any) :	
No of Candidates :	
Revised total no of Candidates :	
No of Candidates Present :	
No of Candidates Absent :	
No of Candidates booked under Malpractice :	

Signature of Invigilators :

1.

2.

Note : Round of Absentees in Red Ink

Date:

Signature of Superintendent