To be filled by the Candidate with his / her own handwriting.

1.) Examination (Class) :_____
_____
2.) Subject: _____
_____
3.) Paper: _____
4.) Option: _____
5.) Medium: _____
6.) Date: _____
7.) Total No. of Sheets Used: _____

Roll No. (in figures): _____
Roll No. (in words): _____
_____
Examination (Class):_____
Subject: _____
Paper:_____
Option:_____

Subject Code: _____

Exam Code: _____

Evaluation: Candidates should not write in this section

CODE NO. (To be allotted by the Evaluator) _____ID NO. _____

Q1. ____ Q2. ____ Q3. ____ Q4. _____ Q5. _____ Q6. ____ Q7. ____ Q8. _____
Q9. ____ Q10. ____ Q11. ___ Q12. ____ Q13. ____ Q14. ____ Q15. ____ Q16. _____

Total Marks in figures: _____ **Name and Signature of the Evaluator**

Total Marks in words : _____

START WRITING YOUR ANSWERS BELOW