

(Invigilator :- Please fold along perforation and tear after examination is over).

OMR ANSWER SHEET

USE BLACK/BLUE BALL POINT PEN ONLY

Original copy

NAME OF THE CANDIDATE

FATHER'S NAME

PROGRAMME NAME / SUBJECT NAME

D.Pharm (Math)

Roll No. -

Q. Booklet No.

Paper Code

Question
Booklet
Series

A

A

B

C

D

218849

OMR ANSWER SHEET NO.

1	☒	B	C	D
2	☐	A	B	☒
3	☐	A	B	☒
4	☐	A	B	☒
5	☐	A	B	☒
6	☐	A	☒	C
7	☐	A	B	☒
8	☐	A	☒	C
9	☐	A	B	☒
10	☐	A	☒	C
11	☐	A	☒	C
12	☐	A	B	☒
13	☐	A	B	☒
14	☐	A	B	☒
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16	☐	A	B	☒
17	☐	A	☒	C
18	☐	A	B	☒
19	☐	A	☒	C
20	☒	B	C	D
21	☐	A	B	☒
22	☐	A	☒	C
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97	☐	A	☒	C
98	☐	A	☒	C
99	☐	A	☒	C
100	☒	B	C	D

Sanjay Khat

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