OMR ANSWER SHEET

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NAME OF THE CANDIDATE

FATHER'S NAME

SUBJECT NAME

HOSPITAL ADMINISTRATION (1334) C

Roll No.	Q. Booklet No.	Paper Code	Question Booklet Series
		1 3 3 4	C

OMR ANSWER SHEET NO. 342356

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

Signature of the Candidate

Signature of the Invigilator with Date

1629