

# OMR ANSWER SHEET

USE BLACK/BLUE BALL POINT PEN ONLY

Original copy

NAME OF THE CANDIDATE

FATHER'S NAME

SUBJECT NAME FOR Ph.D.

PHYSICS

Roll No.

Q. Booklet No.

Paper Code

Question Booklet Series

B

A

B

C

D

500931



OMR ANSWER SHEET NO.

1	A	<input checked="" type="radio"/>	C	D
2	A	B	<input checked="" type="radio"/>	D
3	A	B	<input checked="" type="radio"/>	D
4	A	B	<input checked="" type="radio"/>	D
5	A	<input checked="" type="radio"/>	C	D
6	A	B	<input checked="" type="radio"/>	D
7	A	<input checked="" type="radio"/>	C	D
8	A	B	<input checked="" type="radio"/>	D
9	<input checked="" type="radio"/>	B	C	D
10	<input checked="" type="radio"/>	B	C	D
11	<input checked="" type="radio"/>	B	C	D
12	A	<input checked="" type="radio"/>	C	D
13	A	<input checked="" type="radio"/>	C	D
14	<input checked="" type="radio"/>	B	C	D
15	<input checked="" type="radio"/>	B	C	D
16	<input checked="" type="radio"/>	B	C	D
17	A	B	<input checked="" type="radio"/>	D
18	A	B	<input checked="" type="radio"/>	D
19	A	B	<input checked="" type="radio"/>	D
20	A	B	<input checked="" type="radio"/>	D
21	A	<input checked="" type="radio"/>	C	D
22	A	B	C	<input checked="" type="radio"/>
23	A	B	<input checked="" type="radio"/>	D
24	A	<input checked="" type="radio"/>	C	D
25	<input checked="" type="radio"/>	B	C	D

26	A	<input checked="" type="radio"/>	C	D
27	A	<input checked="" type="radio"/>	C	D
28	A	B	<input checked="" type="radio"/>	D
29	<input checked="" type="radio"/>	B	C	D
30	A	<input checked="" type="radio"/>	C	D
31	A	<input checked="" type="radio"/>	C	D
32	A	B	C	<input checked="" type="radio"/>
33	A	B	<input checked="" type="radio"/>	D
34	A	B	<input checked="" type="radio"/>	D
35	A	<input checked="" type="radio"/>	C	D
36	A	<input checked="" type="radio"/>	C	D
37	<input checked="" type="radio"/>	B	C	D
38	A	B	<input checked="" type="radio"/>	D
39	A	<input checked="" type="radio"/>	C	D
40	A	<input checked="" type="radio"/>	C	D
41	A	B	<input checked="" type="radio"/>	D
42	<input checked="" type="radio"/>	B	C	D
43	A	B	<input checked="" type="radio"/>	D
44	<input checked="" type="radio"/>	B	C	D
45	A	B	<input checked="" type="radio"/>	D
46	A	B	<input checked="" type="radio"/>	D
47	A	B	<input checked="" type="radio"/>	D
48	A	B	C	<input checked="" type="radio"/>
49	A	B	<input checked="" type="radio"/>	D
50	A	B	<input checked="" type="radio"/>	D

51	A	<input checked="" type="radio"/>	C	D
52	A	<input checked="" type="radio"/>	C	D
53	<input checked="" type="radio"/>	B	C	D
54	<input checked="" type="radio"/>	B	C	D
55	A	<input checked="" type="radio"/>	C	D
56	A	<input checked="" type="radio"/>	C	D
57	A	<input checked="" type="radio"/>	C	D
58	A	B	<input checked="" type="radio"/>	D
59	A	B	C	<input checked="" type="radio"/>
60	A	B	<input checked="" type="radio"/>	D
61	A	<input checked="" type="radio"/>	C	D
62	A	<input checked="" type="radio"/>	C	D
63	A	B	<input checked="" type="radio"/>	D
64	A	B	<input checked="" type="radio"/>	D
65	<input checked="" type="radio"/>	B	C	D
66	<input checked="" type="radio"/>	B	C	D
67	A	B	<input checked="" type="radio"/>	D
68	<input checked="" type="radio"/>	B	C	D
69	A	B	<input checked="" type="radio"/>	D
70	A	<input checked="" type="radio"/>	C	D

Signature of the Candidate

Signature of the Invigilator with Date