

परीक्षार्थी का नाम Name of the Candidate

Roll Number in words

Centre Name

प्रश्नपुस्तिका क्रमांक  
Test Booklet Number

# ROLL NUMBER

1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
6	6	6	6	6	6
7	7	7	7	7	7
8	8	8	8	8	8
9	9	9	9	9	9
0	0	0	0	0	0

**BOOKLET CODE**

C


A

B

**MEDIUM**

**E**

**H**



**SUBJECT CODE**

5

1

2

3

4

5

6

**CENTRE CODE**


1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
0	0

Candidate's Signature

**INSTRUCTION FOR INVIGILATOR**

**Check Roll Number, Booklet Code, Subject Code, Centre Code & Signature of the Candidate before signing.**

कृपया हस्ताक्षर करने से पहले प्रश्न पुस्तिका कोड, विषय कोड, केन्द्र कोड व प्ररीक्षार्थी के हस्ताक्षर की जांच कर लें।

अन्वीक्षक के हस्ताक्षर **Signature of the Invigilator**

PART - A				
SL.NO.	ANSWER			
1	(1)	<input checked="" type="radio"/>	(3)	(4)
2	(1)	(2)	<input checked="" type="radio"/>	(4)
3	(1)	<input checked="" type="radio"/>	(3)	(4)
4	(1)	(2)	<input checked="" type="radio"/>	(4)
5	(1)	(2)	(3)	<input checked="" type="radio"/>
6	(1)	(2)	(3)	<input checked="" type="radio"/>
7	(1)	(2)	(3)	<input checked="" type="radio"/>
8	(1)	<input checked="" type="radio"/>	(3)	(4)
9	(1)	<input checked="" type="radio"/>	(3)	(4)
10	<input checked="" type="radio"/>	(2)	(3)	(4)
11	(1)	(2)	(3)	<input checked="" type="radio"/>
12	(1)	(2)	<input checked="" type="radio"/>	(4)
13	<input checked="" type="radio"/>	(2)	(3)	(4)
14	(1)	<input checked="" type="radio"/>	(3)	(4)
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16	(1)	(2)	(3)	<input checked="" type="radio"/>
17	(1)	(2)	(3)	<input checked="" type="radio"/>
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19	(1)	(2)	<input checked="" type="radio"/>	(4)
20	(1)	<input checked="" type="radio"/>	(3)	(4)

PART - B				
SL.NO.	ANSWER			
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23	<input type="radio"/> (1)	<input checked="" type="radio"/>	<input type="radio"/> (3)	<input type="radio"/> (4)
24	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
25	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input checked="" type="radio"/>
26	<input checked="" type="radio"/>	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
27	<input type="radio"/> (1)	<input checked="" type="radio"/>	<input type="radio"/> (3)	<input type="radio"/> (4)
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29	<input type="radio"/> (1)	<input type="radio"/> (2)	<input checked="" type="radio"/>	<input type="radio"/> (4)
30	<input checked="" type="radio"/>	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
31	<input checked="" type="radio"/>	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
32	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input checked="" type="radio"/>
33	<input type="radio"/> (1)	<input type="radio"/> (2)	<input checked="" type="radio"/>	<input type="radio"/> (4)
34	<input type="radio"/> (1)	<input checked="" type="radio"/>	<input type="radio"/> (3)	<input type="radio"/> (4)
35	<input type="radio"/> (1)	<input checked="" type="radio"/>	<input type="radio"/> (3)	<input type="radio"/> (4)
36	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input checked="" type="radio"/>
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38	<input checked="" type="radio"/>	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
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41	<input checked="" type="radio"/>	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)
42	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input checked="" type="radio"/>
43	<input type="radio"/> (1)	<input type="radio"/> (2)	<input checked="" type="radio"/>	<input type="radio"/> (4)
44	<input type="radio"/> (1)	<input type="radio"/> (2)	<input checked="" type="radio"/>	<input type="radio"/> (4)
45	<input type="radio"/> (1)	<input type="radio"/> (2)	<input type="radio"/> (3)	<input type="radio"/> (4)

PART - C				
SL.NO.	ANSWER			
46	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
47	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/>
48	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
49	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
50	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
51	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/>
52	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
53	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
54	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
55	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
56	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
57	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
58	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/>
59	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
60	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
61	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
62	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
63	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/>
64	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
65	<input checked="" type="radio"/>	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4
66	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input checked="" type="radio"/>
67	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
68	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4
69	<input type="radio"/> 1	<input checked="" type="radio"/>	<input type="radio"/> 3	<input type="radio"/> 4
70	<input type="radio"/> 1	<input type="radio"/> 2	<input checked="" type="radio"/>	<input type="radio"/> 4

SL.NO.	ANSWER			
71	(1)	(2)	(3)	(4)
72	(1)	(2)	(3)	(4)
73	(1)	(2)	(3)	(4)
74	(1)	(2)	(3)	(4)
75	(1)	(2)	(3)	(4)

USE DARK HB PENCIL ONLY

**Note: Roll Number, Subject Code & Centre Code should be filled in the boxes using the pattern given as**

For Q. No. 24 & 45 marks given to those who have attempted