

ASSAM PUBLIC SERVICE COMMISSION

(OMR ANSWER SHEET FOR THE POST OF ASSISTANT PROFESSOR
(TECHNICAL & NON TECHNICAL) AND LIBRARIAN IN GOVT. ENGINEERING COLLEGE, ASSAM)

Answer Sheet No.

00332

Centre Name:

Name of Subject:

ELECTRICAL ENGG.

Roll No.				
0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

Test Booklet No.				
0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9



ANSWERS

01	A B <input checked="" type="radio"/> D	21	<input checked="" type="radio"/> B C D	41	A B <input checked="" type="radio"/> D	61	A B <input checked="" type="radio"/> D	81	<input checked="" type="radio"/> B C D
02	<input checked="" type="radio"/> B C D	22	A <input checked="" type="radio"/> C D	42	A B C <input checked="" type="radio"/>	62	A B C <input checked="" type="radio"/>	82	A B C <input checked="" type="radio"/>
03	A B C <input checked="" type="radio"/>	23	A <input checked="" type="radio"/> C D	43	A B <input checked="" type="radio"/> D	63	A <input checked="" type="radio"/> C D	83	<input checked="" type="radio"/> B C D
04	<input checked="" type="radio"/> B C D	24	<input checked="" type="radio"/> B C D	44	A B <input checked="" type="radio"/> D	64	<input checked="" type="radio"/> B C D	84	A <input checked="" type="radio"/> C D
05	A <input checked="" type="radio"/> C D	25	A <input checked="" type="radio"/> C D	45	A B C <input checked="" type="radio"/>	65	A B <input checked="" type="radio"/> D	85	<input checked="" type="radio"/> B C D
06	A <input checked="" type="radio"/> C D	26	A B C <input checked="" type="radio"/>	46	A <input checked="" type="radio"/> C D	66	<input checked="" type="radio"/> B C D	86	A B <input checked="" type="radio"/> D
07	A <input checked="" type="radio"/> C D	27	A <input checked="" type="radio"/> C D	47	A B <input checked="" type="radio"/> D	67	<input checked="" type="radio"/> B C D	87	A <input checked="" type="radio"/> C D
08	A B <input checked="" type="radio"/> D	28	A B <input checked="" type="radio"/> D	48	A B C <input checked="" type="radio"/>	68	A B <input checked="" type="radio"/> D	88	A <input checked="" type="radio"/> C D
09	A B C <input checked="" type="radio"/>	29	A B C <input checked="" type="radio"/>	49	A B <input checked="" type="radio"/> D	69	A <input checked="" type="radio"/> C D	89	<input checked="" type="radio"/> B C D
10	A B <input checked="" type="radio"/> D	30	A <input checked="" type="radio"/> C D	50	A <input checked="" type="radio"/> C D	70	A B C <input checked="" type="radio"/>	90	A B C <input checked="" type="radio"/>
11	A B <input checked="" type="radio"/> D	31	<input checked="" type="radio"/> B C D	51	<input checked="" type="radio"/> B C D	71	A B <input checked="" type="radio"/> D	91	A B C <input checked="" type="radio"/>
12	A <input checked="" type="radio"/> C D	32	A <input checked="" type="radio"/> C D	52	<input checked="" type="radio"/> B C D	72	A <input checked="" type="radio"/> C D	92	A <input checked="" type="radio"/> C D
13	A B C <input checked="" type="radio"/>	33	<input checked="" type="radio"/> B C D	53	A <input checked="" type="radio"/> C D	73	A B <input checked="" type="radio"/> D	93	A B <input checked="" type="radio"/> D
14	A <input checked="" type="radio"/> C D	34	A B C <input checked="" type="radio"/>	54	A B <input checked="" type="radio"/> D	74	<input checked="" type="radio"/> B C D	94	A B <input checked="" type="radio"/> D
15	<input checked="" type="radio"/> B C D	35	<input checked="" type="radio"/> B C D	55	A <input checked="" type="radio"/> C D	75	A B <input checked="" type="radio"/> D	95	<input checked="" type="radio"/> B C D
16	A B C <input checked="" type="radio"/>	36	A B <input checked="" type="radio"/> D	56	<input checked="" type="radio"/> B C D	76	A B <input checked="" type="radio"/> D	96	<input checked="" type="radio"/> B C D
17	A B C <input checked="" type="radio"/>	37	A B <input checked="" type="radio"/> D	57	A <input checked="" type="radio"/> C D	77	A B <input checked="" type="radio"/> D	97	A B C <input checked="" type="radio"/>
18	A <input checked="" type="radio"/> C D	38	A B <input checked="" type="radio"/> D	58	A B <input checked="" type="radio"/> D	78	<input checked="" type="radio"/> B C D	98	A B C <input checked="" type="radio"/>
19	A B <input checked="" type="radio"/> D	39	A B C <input checked="" type="radio"/>	59	<input checked="" type="radio"/> B C D	79	A B <input checked="" type="radio"/> D	99	A B C <input checked="" type="radio"/>
20	A <input checked="" type="radio"/> C D	40	<input checked="" type="radio"/> B C D	60	A B C <input checked="" type="radio"/>	80	A <input checked="" type="radio"/> C D	100	A <input checked="" type="radio"/> C D

PLEASE READ THE INSTRUCTIONS GIVEN ON SIDE-II

I hereby certify that I have checked the above information of the Candidate Roll No. and Test Booklet No.

I hereby undertake that the information provided by me for my eligibility for Examination is true to the best of my knowledge. In case any information is found to be incorrect / incomplete at any stage, I am liable for disqualification for Examination and legal action.

Full Signature of the Invigilator with date

Full Signature of the Candidate with date