

SIDE - I

ASSAM PUBLIC SERVICE COMMISSION

(OMR ANSWER SHEET FOR THE POST OF ASSTT. ENGINEER
(CIVIL) (MECH.), (ELECT.), (CHEMICAL) UNDER P.H.E. DEPTT)

Answer Sheet No.

05606

Centre Name:

Name of Subject:

Electrical Engineering



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

Series
C
A
B
<input checked="" type="radio"/>
D

Answer Sheet
without
marking
Series shall
not be
evaluated.



ANSWERS									
01	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	21	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	41	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	61	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	81	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D
02	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	22	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	42	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	62	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	82	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
03	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	23	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	43	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	63	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	83	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
04	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	24	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	44	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	64	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	84	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
05	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	25	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	45	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	65	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	85	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
06	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	26	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	46	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	66	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	86	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D
07	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	27	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	47	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	67	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	87	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
08	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	28	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	48	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	68	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	88	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D
09	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	29	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	49	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	69	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	89	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D
10	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	30	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	50	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	70	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	90	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D
11	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	31	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	51	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	71	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	91	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D
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15	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	35	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	55	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	75	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	95	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D
16	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	36	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	56	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	76	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	96	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D
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19	A <input type="radio"/> B <input type="radio"/> C <input checked="" type="radio"/> D	39	<input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	59	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D	79	A <input checked="" type="radio"/> B <input type="radio"/> C <input type="radio"/> D	99	A <input type="radio"/> B <input checked="" type="radio"/> C <input type="radio"/> D
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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 informations 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



J0266