

ANSWER KEY

SIDE - I

Answer Sheet No.

ASSAM PUBLIC SERVICE COMMISSION

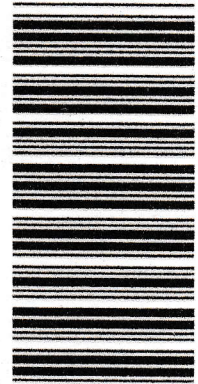
04210

(OMR ANSWER SHEET FOR THE POST OF A.E. (C) UNDER P.W. DEPTT.)

Centre Name: _____

Name of Subject: **GENERAL STUDIES & GENERAL ENGLISH**

Roll No.					Test Booklet No.					Series	
0	0	0	0	0	0	0	0	0	0	<input type="radio"/> A	<input type="radio"/> B
1	1	1	1	1	1	1	1	1	1	<input type="radio"/> C	<input type="radio"/> D
2	2	2	2	2	2	2	2	2	2	<input checked="" type="radio"/>	<input type="radio"/>
3	3	3	3	3	3	3	3	3	3	<input type="radio"/>	<input type="radio"/>
4	4	4	4	4	4	4	4	4	4	Answer Sheet without marking Series shall not be evaluated.	
5	5	5	5	5	5	5	5	5	5		
6	6	6	6	6	6	6	6	6	6		
7	7	7	7	7	7	7	7	7	7		
8	8	8	8	8	8	8	8	8	8		
9	9	9	9	9	9	9	9	9	9		



ANSWERS																								
01	A	<input checked="" type="radio"/>	C	D	21	<input checked="" type="radio"/>	B	C	D	41	A	<input checked="" type="radio"/>	C	D	61	A	<input checked="" type="radio"/>	C	D	81	A	B	<input checked="" type="radio"/>	D
02	A	<input checked="" type="radio"/>	C	<input checked="" type="radio"/>	22	A	B	C	<input checked="" type="radio"/>	42	A	B	<input checked="" type="radio"/>	D	62	A	<input checked="" type="radio"/>	C	D	82	A	<input checked="" type="radio"/>	C	D
03	A	B	<input checked="" type="radio"/>	D	23	A	B	C	<input checked="" type="radio"/>	43	A	B	<input checked="" type="radio"/>	D	63	<input checked="" type="radio"/>	B	C	D	83	<input checked="" type="radio"/>	B	C	D
04	A	<input checked="" type="radio"/>	C	D	24	A	<input checked="" type="radio"/>	C	D	44	A	<input checked="" type="radio"/>	C	D	64	A	B	<input checked="" type="radio"/>	D	84	A	<input checked="" type="radio"/>	C	D
05	A	<input checked="" type="radio"/>	C	D	25	<input checked="" type="radio"/>	B	C	D	45	A	B	C	<input checked="" type="radio"/>	65	A	B	C	<input checked="" type="radio"/>	85	A	<input checked="" type="radio"/>	C	D
06	A	<input checked="" type="radio"/>	C	D	26	<input checked="" type="radio"/>	B	C	D	46	A	<input checked="" type="radio"/>	C	D	66	A	B	<input checked="" type="radio"/>	D	86	<input checked="" type="radio"/>	B	C	D
07	<input checked="" type="radio"/>	B	C	D	27	A	B	<input checked="" type="radio"/>	D	47	<input checked="" type="radio"/>	B	C	D	67	<input checked="" type="radio"/>	B	C	D	87	A	<input checked="" type="radio"/>	C	D
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15	A	<input checked="" type="radio"/>	C	D	35	A	B	C	<input checked="" type="radio"/>	55	A	B	C	<input checked="" type="radio"/>	75	<input checked="" type="radio"/>	B	C	D	95	A	<input checked="" type="radio"/>	C	D
16	A	B	<input checked="" type="radio"/>	D	36	A	<input checked="" type="radio"/>	C	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	<input checked="" type="radio"/>	B	C	D	37	A	B	C	<input checked="" type="radio"/>	57	A	<input checked="" type="radio"/>	C	D	77	A	B	<input checked="" type="radio"/>	D	97	A	B	C	<input checked="" type="radio"/>
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20	<input checked="" type="radio"/>	B	C	D	40	A	B	C	<input checked="" type="radio"/>	60	<input checked="" type="radio"/>	B	C	D	80	A	B	C	<input checked="" type="radio"/>	100	A	B	C	D

Compared by
[Signature]
 1/12/20
[Signature]
 1/12/20
[Signature]
 01/12/20

PLEASE READ THE INSTRUCTIONS GIVEN ON SIDE-II

<p>I hereby certify that I have checked the above information of the Candidate Roll No. and Test Booklet No.</p> <p style="text-align: center;">Full Signature of the Invigilator with date</p>	<p>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.</p> <p style="text-align: center;">Full Signature of the Candidate with date</p>
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