

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – A 1

[**ANSWER** portion of "USED" OMR answer sheets]
(GENERAL CANDIDATES)

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the Venue : Venue No :

No. of candidates allotted: Present : Absent :

No. of answer portions of "USED" OMR answer sheets kept in this bundle :

Time of packing of this bundle :

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – A2

[**ANSWER** portion of “USED” OMR answer sheets]
(DIFFERENTLY ABLED CANDIDATES)

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the Venue : Venue No :

No. of differently abled candidates allotted : Present : Absent :

No. of answer portion of “USED” OMR answer sheets kept in this bundle :

Time of packing of this bundle :

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION
BUNDLE – A [“USED” OMR ANSWER SHEETS]

[Bundles **A1** and **A2**]

Name of the examination :	<input style="width: 100%;" type="text"/>		
Date :	<input style="width: 200px;" type="text"/>	Session :	<input style="width: 100px;" type="text"/>
Name of the centre :	<input style="width: 350px;" type="text"/>	Centre code :	<input style="width: 100px;" type="text"/>
Name of the Venue :	<input style="width: 350px;" type="text"/>	Venue No :	<input style="width: 100px;" type="text"/>
No. of candidates allotted:	<input style="width: 120px;" type="text"/>	Present :	<input style="width: 100px;" type="text"/>
		Absent :	<input style="width: 100px;" type="text"/>
No. of wax seals affixed			: <input style="width: 100px;" type="text"/>
Time of packing of this bundle			: <input style="width: 100px;" type="text"/>
No. of “USED” OMR answer sheets kept in this bundle	}	General candidates	: <input style="width: 100px;" type="text"/>
		Differently abled candidates	: <input style="width: 100px;" type="text"/>
		Total	: <input style="width: 100px;" type="text"/>

CERTIFICATE

I was personally present during the counting, tearing off answer portion from personalized portion, packing and sealing of this bundle.

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :	<input style="width: 250px; height: 40px;" type="text"/>	<input style="width: 250px; height: 40px;" type="text"/>
Name in block letters :	<input style="width: 250px; height: 40px;" type="text"/>	<input style="width: 250px; height: 40px;" type="text"/>
Designation :	<input style="width: 250px; height: 40px;" type="text"/>	<input style="width: 250px; height: 40px;" type="text"/>

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – B1

[**PERSONALISED OMR** portions of "**GENERAL**" and "**DIFFERENTLY ABLED**" candidates]

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the venue : Venue No :

No. of candidates allotted: Present : Absent :

No. of wax seals affixed : Time of packing of this bundle :

No. of PERSONALISED portion of "USED" OMR answer sheets kept in this bundle	}	General candidates	:	<input type="text"/>
		Differently abled candidates	:	<input type="text"/>
		Total	:	<input type="text"/>

CERTIFICATE

I was personally present during the counting, tearing off answer portion from personalized portion, packing and sealing of this bundle .

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – B2

[ATTENDANCE SHEET cum HALL SKETCH]

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the Venue : Venue No :

No. of candidates allotted: Present : Absent :

Time of packing of this bundle :

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

**BUNDLE – B3
(Reports)**

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the Venue : Venue No :

Sl.No.	Name of the record	Tick []
1.		

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – B4 (ADDITIONAL , DEFECTIVE AND ABSENTEE OMRs)

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the venue : Venue No :

[1] No. of additional OMR answer sheets received :

[2] No. of additional OMR answer sheets used :

[3] Balance [1-2] :

[4] No. of un-used additional OMRs :

[5] No. of defective OMRs :

[6] No. of OMRs of absentee candidates :

[7] Total [4+5+6] :

No. of wax seals affixed : Time of packing of this bundle :

CERTIFICATE

I hereby certify that this bundle contains a total of _____ OMR answer sheets
(as in Sl.No.7 above).

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date	:	<input type="text"/>	<input type="text"/>
Name in block letters	:	<input type="text"/>	<input type="text"/>
Designation	:	<input type="text"/>	<input type="text"/>

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – B5

[DEFECTIVE QUESTION BOOKLET(S)]

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the venue : Venue No :

No. of **DEFECTIVE QUESTION BOOKLETS** kept in this bundle :

Time of packing of this bundle :

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION
BUNDLE – B (Bundles B1, B2,B3,B4 and B5)

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the Venue : Venue No :

Sl.No.	Bundle Number	Tick []
1.	Bundle No. B1	
2.	Bundle No. B2	
3.	Bundle No. B3	
4.	Bundle No. B4	
5.	Bundle No. B5	

No. of wax seals affixed :

Time of packing of this bundle :

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – I [Bundles A and B]

Name of the examination :	<input type="text"/>		
Date :	<input type="text"/>	Session :	<input type="text"/>
Name of the centre :	<input type="text"/>	Centre code :	<input type="text"/>
Name of the Venue :	<input type="text"/>	Venue No :	<input type="text"/>
No. of candidates allotted:	<input type="text"/>	Present :	<input type="text"/>
		Absent :	<input type="text"/>
No. of wax seals affixed :	<input type="text"/>	Time of packing of this bundle :	<input type="text"/>

CERTIFICATE

This bundle contains "**Bundles A and B**" and I was personally present during the packing and sealing of this bundle.

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :	<input type="text"/>	<input type="text"/>
Name in block letters :	<input type="text"/>	<input type="text"/>
Designation :	<input type="text"/>	<input type="text"/>

(MOFUSSIL CENTRE)

HEAD OF MOBILE TEAM

TREASURY OFFICIAL

Time of receipt of this bundle:

Signature with date

:

(CHENNAI CENTRE)

VAN DUTY STAFF

RECEIVING OFFICER

Time of receipt of this bundle:

Signature with date

:

TAMIL NADU PUBLIC SERVICE COMMISSION

BUNDLE – II

(ADDITIONAL AND ABSENTEES' QUESTION BOOKLETS)

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the venue : Venue No :

[1] No. of additional question booklets received :

[2] No. of additional question booklets used :

[3] Balance [1-2] :

[4] No. of un-used additional question booklets :

[5] No. of question booklets of absentee candidates :

[6] No. of defective question booklets (kept in Bundle-V) :

[7] Total [4+5-6] :

No. of wax seals affixed : Time of packing of this bundle :

CERTIFICATE

I hereby certify that this bundle contains a total of _____ question booklets
(as in Sl.No.7 above).

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :

TAMIL NADU PUBLIC SERVICE COMMISSION

COVER – C

[Memory Card]

Name of the examination :

Date : Session :

Name of the centre : Centre code :

Name of the venue : Venue No :

Time of packing of this bundle :

The Memory Card of the video coverage is kept in this bundle

CHIEF INVIGILATOR

INSPECTION OFFICER

Signature with date :

Name in block letters :

Designation :