GUNOTSAV - 2024
STUDENT EVALUATION FORM

CLASS - I

- ✓ **USE ONLY BLACK OR BLUE BALL POINT PEN**
- ✗ **DO NOT USE INK / GEL PEN**
1. Please do not overwrite because it will be treated as wrong answer.
2. Please **DO NOT FOLD / TEAR OMR SHEET.**

Answer Sheet No.

Correct way of marking the answer

Wrong way of marking the answer

SCHOOL UDISE CODE :-

SCHOOL NAME :-

DISTRICT :-

CLUSTER :-

NAME & SIGNATURE OF EXTERNAL EVALUATOR
(Inside the box only)

BLOCK :-

DAY :- 1 2 3

NAME OF STUDENT & CODE	LANGUAGE - I										LANGUAGE - II										MATHEMATICS									
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
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