

NOPS Answer Sheet Guide

Professional Exam Completion Standards

Mr. Gullo

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Learning Objectives

By the end of this guide, you will be able to:

- Properly handle and maintain your NOPS answer sheet
- Complete personal information and registration accurately
- Apply correct marking techniques for optimal scanning
- Follow appropriate error correction protocols

NOPS System Requirements

Critical Materials

- **Blue or black pen only** (no pencils or erasers)
- Clean, flat working surface
- Careful attention to detail

Answer Sheet Care

- Keep sheet clean, dry, and flat at all times
- Avoid folding, creasing, or damaging the paper
- Handle with clean hands only

Two-Step Registration Procedure

Step 1: Write Digits

Carefully write your registration number in the boxes at the top of the grid, placing one digit per box.

Step 2: Mark Bubbles

For each digit written above, locate the corresponding bubble in the column directly below and mark with a clear X.

Example: Registration number 12345


- Write "1" in first box → Mark "1" bubble below
- Write "2" in second box → Mark "2" bubble below
- Continue for all five digits

Answer Sheet Reference

Shanghai Nanyang Model Private School

how-to-nops - Nops-Practice 2025-05-12



Personal Data		Registration Number	
Family Name:	<u>Gullo</u>	<u>0405110</u>	
Given Name:	<u>Paul</u>		
Signature:			
checked			
In this section no changes or modifications must be made!		Scrambling	
Type	Exam ID(how-to-nops)	00	
005	25051200001		

0	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0
1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2
3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4
5	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5
6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6
7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7
8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8
9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9

Please mark the boxes carefully: ☒ Not marked: ☐ or ☐

This document is scanned automatically. Please keep clean and do not bend or fold. For filling in the document please use a blue or black pen.

Only clearly marked and positionally accurate crosses will be processed!

Answers 1 - 5

	a	b	c	d
1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Proper Marking Technique

Multiple Choice Answers

- Mark exactly **one** answer per question
- Use a clear X that fits completely inside the designated box
- Ensure marks are dark and legible
- Do not extend marks outside box boundaries

Written Responses

- Use designated answer boxes on separate page
- Keep all work within box boundaries
- Write legibly in blue or black pen
- Include complete solutions and explanations

Managing Mistakes

Important: No Erasures Allowed

Since pen marks cannot be erased, any marking errors require immediate attention.

Incorrect approaches:

- Crossing out wrong answers
- Scribbling over incorrect marks
- Using correction fluid or tape

Correct procedure:

- Raise your hand immediately
- Request a new answer sheet from the exam supervisor
- Transfer all correct answers to the new sheet

Quality Assurance Review

Personal Information:

- ☐ Name written clearly
- ☐ Signature provided
- ☐ Registration number complete
- ☐ Bubbles marked correctly

Answer Quality:

- ☐ One mark per question
- ☐ All marks clear and dark
- ☐ No stray marks present
- ☐ Sheet undamaged

Final Step

Review your completed answer sheet thoroughly before submission to ensure optimal scanning results.