

CANDIDATE NAME: prasant

SCHOOL NAME: GREEN VALLEY HIGH SCHOOL

EXAM DATE	LEVEL	STANDARD
6/11/2025	1	01

ROLL NO.	HOW TO DARKEN
ROLL NO.  761011502-15-10	<p>CORRECT <input checked="" type="radio"/> (B) <input type="radio"/> (C)</p> <p>WRONG <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)</p>

MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS	Q.No.	ANSWER	Q.No.	ANSWER	Q.No.	ANSWER
GIMO	1.	<input type="radio"/> (A) <input type="radio"/> (B) <input checked="" type="radio"/> (C)	21.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	41	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	2.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	22.	<input checked="" type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	42	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	3.	<input checked="" type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	23.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	43	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	4.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	24.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	44	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	5.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	25.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	45	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	6.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	26.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	46	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	7.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	27.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	47	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	8.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	28.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	48	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	9.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	29.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	49	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	10.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	30.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	50	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
	11.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	31.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	12.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	32.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	13.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	33.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	14.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	34.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	15.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	35.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	16.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	36.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	17.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	37.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	18.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	38.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	19.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	39.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		
	20.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)	40.	<input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)		

Your Real Competition	Gowbell Olympiads Plot No-18, Matalia Dwaraka, Sector-3, New Delhi, India - 110059
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<u>Signature of Candidate</u>	<u>Signature of Invigilator</u>
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CANDIDATE NAME: JOHN DOE

SCHOOL NAME: GREEN VALLEY HIGH SCHOOL

EXAM DATE

6/11/2025

LEVEL

1

STANDARD

02

ROLL NO.



761012101-21-10

1. Write your **Roll Number** on the left side of the OMR sheet in the box specified and darken the appropriate circles given by using **HB Pencil/ball-point pen (blue/black)** only.
2. Put your **Full Name, School Name, Standard, Subject, Exam Date, Level** in the space provided.
3. Darken the circle(s) completely that you think appropriate.
4. Do not fold or crumple the OMR Sheet.
5. Before submitting the OMR Sheet, the candidate should verify that all the entries are made correctly and duly/signed by the invigilator.
6. Do **Not** do any rough work on this OMR Sheet.

HOW TO DARKEN

CORRECT
 (B) (C)

WRONG
 (A) (B) (C)
 (A) (B) (C)
 (A) (B) (C)
 (A) (B) (C)

MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS

Q.No. **ANSWER**

Q.No. **ANSWER**

Q.No. **ANSWER**

GIMO

**Your Real
Competition**

1.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
2.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
3.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
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6.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
7.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
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10.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
11.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
12.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
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15.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
16.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
17.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
18.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
19.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
20.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>

21.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
22.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
23.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
24.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
25.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
26.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
27.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
28.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
29.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
30.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
31.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
32.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
33.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
34.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
35.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
36.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
37.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
38.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
39.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>
40.	(A) <input type="radio"/> (B) <input type="radio"/> (C) <input checked="" type="radio"/>

Gowbell Olympiads

Plot No-18, Matalia
Dwarka, Sector-3, New
Delhi, India - 110059

Signature of Candidate

Signature of Invigilator

CANDIDATE NAME: _____

PKMS

SCHOOL NAME: _____

GREEN VALLEY HIGH SCHOOL

EXAM DATE	LEVEL	STANDARD
6/11/2025	1	01

ROLL NO.	HOW TO DARKEN
 761011501-15-10	CORRECT <input checked="" type="radio"/> (B) <input type="radio"/> (C) WRONG <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)

MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS	Q.No.	ANSWER	Q.No.	ANSWER	Q.No.	ANSWER
GIMO	1.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	21.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	41	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	2.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	22.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	42	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	3.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	23.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	43	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	4.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	24.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	44	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	5.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	25.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	45	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	6.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	26.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	46	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	7.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	27.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	47	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	8.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	28.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	48	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	9.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	29.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	49	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	10.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	30.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	50	(A) <input type="radio"/> (B) <input type="radio"/> (C)
	11.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	31.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	12.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	32.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	13.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	33.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	14.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	34.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	15.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	35.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	16.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	36.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	17.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	37.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	18.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	38.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
	19.	(A) <input type="radio"/> (B) <input type="radio"/> (C)	39.	(A) <input type="radio"/> (B) <input type="radio"/> (C)		
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Your Real Competition	Gowbell Olympiads Plot No-18, Matalia Dwaraka, Sector-3, New Delhi, India - 110059
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<hr/> Signature of Candidate	<hr/> Signature of Invigilator
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ANSWER SHEET

Filling of all columns completely and accurately

CANDIDATE NAME: prasant

SCHOOL NAME: GREEN VALLEY HIGH SCHOOL

EXAM DATE	LEVEL	STANDARD
6/11/2025	1	01

ROLL NO.	HOW TO DARKEN
 761011502-15-11	CORRECT <input checked="" type="radio"/> (B) <input type="radio"/> (C) WRONG <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)

MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS	Q.No.	ANSWER	Q.No.	ANSWER	Q.No.	ANSWER
GISO	1.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	21.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	41	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	2.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	22.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	42	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	3.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	23.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	43	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	4.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	24.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	44	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	5.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	25.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	45	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	6.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	26.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	46	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	7.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	27.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	47	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	8.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	28.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	48	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	9.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	29.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	49	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	10.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	30.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	50	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)
	11.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	31.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)		
	12.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	32.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)		
	13.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	33.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)		
	14.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	34.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)		
	15.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)	35.	<input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)		
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Your Real Competition	Gowbell Olympiads Plot No-18, Matalia Dwaraka, Sector-3, New Delhi, India - 110059
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<u>Signature of Candidate</u>	<u>Signature of Invigilator</u>
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ANSWER SHEET

Filling of all columns completely and accurately

CANDIDATE NAME: JOHN DOE

SCHOOL NAME: GREEN VALLEY HIGH SCHOOL

EXAM DATE	LEVEL	STANDARD
6/11/2025	1	02

ROLL NO.	1. Write your Roll Number on the left side of the OMR sheet in the box specified and darken the appropriate circles given by using HB Pencil/ball-point pen (blue/black) only. 2. Put your Full Name, School Name, Standard, Subject, Exam Date, Level in the space provided. 3. Darken the circle(s) completely that you think appropriate. 4. Do not fold or crumple the OMR Sheet. 5. Before submitting the OMR Sheet, the candidate should verify that all the entries are made correctly and duly/signed by the invigilator. 6. Do Not do any rough work on this OMR Sheet.	HOW TO DARKEN CORRECT <input checked="" type="radio"/> (B) <input type="radio"/> (C) WRONG <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)
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MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS	Q.No.	ANSWER	Q.No.	ANSWER	Q.No.	ANSWER
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	7.	(A) (B) (C)	27.	(A) (B) (C)	47	(A) (B) (C)
	8.	(A) (B) (C)	28.	(A) (B) (C)	48	(A) (B) (C)
	9.	(A) (B) (C)	29.	(A) (B) (C)	49	(A) (B) (C)
	10.	(A) (B) (C)	30.	(A) (B) (C)	50	(A) (B) (C)
	11.	(A) (B) (C)	31.	(A) (B) (C)		
	12.	(A) (B) (C)	32.	(A) (B) (C)		
	13.	(A) (B) (C)	33.	(A) (B) (C)		
	14.	(A) (B) (C)	34.	(A) (B) (C)		
	15.	(A) (B) (C)	35.	(A) (B) (C)		
	16.	(A) (B) (C)	36.	(A) (B) (C)		
	17.	(A) (B) (C)	37.	(A) (B) (C)		
	18.	(A) (B) (C)	38.	(A) (B) (C)		
	19.	(A) (B) (C)	39.	(A) (B) (C)		
	20.	(A) (B) (C)	40.	(A) (B) (C)		

Your Real Competition	Gowbell Olympiads Plot No-18, Matalia Dwaraka, Sector-3, New Delhi, India - 110059
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<u>Signature of Candidate</u>	<u>Signature of Invigilator</u>
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CANDIDATE NAME: _____

PKMS

SCHOOL NAME: _____

GREEN VALLEY HIGH SCHOOL

EXAM DATE	LEVEL	STANDARD
6/11/2025	1	01

ROLL NO.	HOW TO DARKEN
<p>ROLL NO.: 761011501-15-11</p> 	<p>CORRECT <input checked="" type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C)</p> <p>WRONG <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (A) <input checked="" type="radio"/> (B) <input type="radio"/> (C)</p>

MARK YOUR ANSWERS WITH HB PENCIL/BALL POINT PEN (BLUE/BLACK)

SUBJECTS	Q.No.	ANSWER	Q.No.	ANSWER	Q.No.	ANSWER
GISO	1.	(A) (B) (C)	21.	(A) (B) (C)	41	(A) (B) (C)
	2.	(A) (B) (C)	22.	(A) (B) (C)	42	(A) (B) (C)
	3.	(A) (B) (C)	23.	(A) (B) (C)	43	(A) (B) (C)
	4.	(A) (B) (C)	24.	(A) (B) (C)	44	(A) (B) (C)
	5.	(A) (B) (C)	25.	(A) (B) (C)	45	(A) (B) (C)
	6.	(A) (B) (C)	26.	(A) (B) (C)	46	(A) (B) (C)
	7.	(A) (B) (C)	27.	(A) (B) (C)	47	(A) (B) (C)
	8.	(A) (B) (C)	28.	(A) (B) (C)	48	(A) (B) (C)
	9.	(A) (B) (C)	29.	(A) (B) (C)	49	(A) (B) (C)
	10.	(A) (B) (C)	30.	(A) (B) (C)	50	(A) (B) (C)
	11.	(A) (B) (C)	31.	(A) (B) (C)		
	12.	(A) (B) (C)	32.	(A) (B) (C)		
	13.	(A) (B) (C)	33.	(A) (B) (C)		
	14.	(A) (B) (C)	34.	(A) (B) (C)		
	15.	(A) (B) (C)	35.	(A) (B) (C)		
	16.	(A) (B) (C)	36.	(A) (B) (C)		
	17.	(A) (B) (C)	37.	(A) (B) (C)		
	18.	(A) (B) (C)	38.	(A) (B) (C)		
	19.	(A) (B) (C)	39.	(A) (B) (C)		
	20.	(A) (B) (C)	40.	(A) (B) (C)		

Your Real Competition	Gowbell Olympiads Plot No-18, Matalia Dwaraka, Sector-3, New Delhi, India - 110059
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_____ Signature of Candidate	_____ Signature of Invigilator
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