

SCANTRON ANSWER SHEET

Name: Ash, Jason
Date: 2025-12-20

ID: 123
Version: A



- Instructions:**
- Use a #2 pencil only
 - Fill bubbles completely
 - Erase cleanly if you change an answer
 - Do not fold or crease this sheet
 - Mark only one answer per question

1.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	A	B	C	D
2.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	A	B	C	D
3.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
	A	B	C	D
4.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
	A	B	C	D
5.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	A	B	C	D
6.	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
	A	B	C	D
7.	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
	A	B	C	D
8.	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	A	B	C	D

SCANTRON ANSWER SHEET

Name: Doe, Jane

ID: 12346

Date: 2025-12-20

Version: A



Instructions:

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1.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
2.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
3.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
4.

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
A	B	C	D
5.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
6.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
7.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D
8.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>
A	B	C	D

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SCANTRON ANSWER SHEET

Name: Neutron, Jimmy

ID: 55443

Date: 2025-12-20

Version: A



Instructions:

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- Fill bubbles completely
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- Do not fold or crease this sheet
- Mark only one answer per question

1. ☒ A ☐ B ☒ C ☐ D
2. ☐ A ☐ B ☐ C ☐ D
3. ☐ A ☒ B ☐ C ☒ D
4. ☐ A ☐ B ☐ C ☐ D
5. ☐ A ☐ B ☒ C ☐ D
6. ☐ A ☒ B ☐ C ☐ D
7. ☐ A ☒ B ☐ C ☐ D
8. ☒ A ☐ B ☐ C ☐ D

SCANTRON ANSWER SHEET

Name: Smith, John

ID: 12345

Date: 2025-12-20

Version: A



Instructions:

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- Mark only one answer per question

1.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
2.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
3.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
4.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
5.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
6.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
7.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D
8.

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A	B	C	D