KERALA PUBLIC SERVICE COMMISSION

FORM NO. CHECK LIST FOR ASSISTANT SUPERINTENDENTS

(The Assistant Superintendent shall fill up this check -list, as when each activity is completed and return to the Chief Superintendent at the end of the duty)

1	Name of the Assistant Superintendent & PEN (ID Card No. in case of not having PEN)		
2	Name & Date of Examination		
3	Alloted Exam Hall No./ Room No.		
4	Time of arriving at the alloted Hall / Room		
5	State Whether announcement has been made in the hall / room that the candidates shall carry only Admission Ticket, Identity Proof & Pen (Blue / Black) and should not carry any other items.	Yes/No	
6	OMR Packet No.		
	OMR Code		
7	Whether all the candidates seated in their respective seats as per the seating arrangement plan are identified individually by verifying their Admission Tickets, Identity proofs & Address List and their ID proof Nos. have been noted in the Address List.	Yes/No	
8	Whether all the present candidates in the class room affixed their signatures in the Address List and also across their photos.	Yes/No	
9	Whether announcement has been made that the candidates shall separate the A & B part of the OMR sheets only after the examination.	Yes/No	
10	Whether ensured that OMR Sheets and Question papers are distributed strictly in accordance with the Alpha Code alloted to each candidate.	Yes/No	
11	Whether ensured that all candidates have written and bubbled their Reg. Nos. in the OMR sheet properly. Note down the register number improperly bubbled.	Yes/No	
12	Whether question paper packet is received with the seal intact and opened in due time in front of candidates and signature of two candidates obtained.	Yes/No	
13	Question Paper Packet No.		
	Question Paper Code		
	Range of Sl. No. of Question Papers	FromTo	

14	Whether announcement has been made that the candidates shall write their Name & Reg. No. on the facing sheet of the question paper and the same verified by the Assistant Superintendent.	
15	Whether unused Question Papers are counted, packed and sealed in front of candidates and number noted above the question paper packet cover.	I I
16	Total No. of candidates present and Absent	PresentAbsent
	Total No. of unused OMR sheets	
	Total No. of unused question papers	
17	Whether ensured that Asst. Superintendents signature has been affixed on the space provided in the A part of OMR scripts and also on the signed list.	I I
18	No. of OMR Scripts collected Part A Part B	
19	No. of Tamil / Kannada Scripts Tamil (if any) Kannada	
20	Tamil / Kannada Scripts, if any are marked in the Signed List	Yes/No/NA
21	Any malpractice / irregularity noted in side the Exam Hall / Room. If yes, nature of the malpractice and the action taken (should be furnished in separate sheet and countersigned by both Chief Superintendent & Additional Chief Superintendent)	

Place:	Signature,
Date:	Name & Designation of
	Assistant Superintendent