



CLOSING CERTIFICATE

CENTRE CODE: _____

CENTRE CODE: _____

Name of the Centre : _____

Name of the Examination : _____

Date and Time of Examination : _____

We the undersigned (hereby) certify that the envelope(s) /Bundles containing used OMR Sheets and unused Question –cum-Answer Booklets for Tier I Objective Type examination and other packets for the above said examination have been sealed Properly and delivered to the

Observer-cum-Coordinator at (Time)_____A.M./P.M. on _____(Date)

Signature of
(Centre Superintendant)

Signature of
(Observer-cum-Coordinator)

Signature of
(Asstt. Observer)