

PANJAB UNIVERSITY, CHANDIGARH
INSPECTION REPORT OF THE EXAMINATION CENTRE

<p>A. Name of Examination..... Year.....Session..... Date of Inspection..... Name and Address of Centre Superintendent</p>	<p>Name of Centre.....Centre No..... Time : Arrival.....Departure..... Name of the Inspector/s (In Capitals)</p>
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B.	(i) Kindly Inspect the question paper envelopes of the day and report if the seals on the envelopes (opened and unopened) were intact.	YES / NO				
	(ii) Number of candidates present and account of question papers on the day of inspection.		Number of candidates present	No. of question papers : Contained in envelope Distributed		Balance of question papers
	Examination	Subject	Paper			
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____

C. Kindly report whether the candidates were physically searched and if so, how much of incriminating material they were dispossessed of. Kindly say whether the amount of incriminating material calls for daily searches.

D. (i) Kindly inspect the answer-books account with the college and physically check the loose answer-books (other than those contained in bundles.)

(ii) Kindly report whether the accounts of answer-books in prescribed forms were in order (SF-6).

E. Kindly report if the seating arrangements are to the entire satisfaction of the Flying Squad inspection team.

F. Observations regarding supervisory staff : Kindly report about the effectiveness of supervision and provide details of those members of supervisory staff who have not reported for duty at the centre.

P.T.O.

NOTE : In case of Merger of Examination Centres, please report the same in this proforma.

G. Name of the Deputy/Asstt. Supdts., who did not report for Duty.

H. Number and particulars of alleged use of Unfair Means cases reported by the Inspector.

Examination	Subject	Roll Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I. Observations regarding outside interference, if any.

J. (i) Deficiencies/defects (if any) and recommendation therein.

K. **OBSERVATIONS REGARDING**
(i) Infrastructure Seating, Illumination & Ventilation
(ii) Facilities Cleanliness, water & other essential requirements

Address of the Inspector/s:	Signature of the Inspector/s :
(1) _____ _____	(1) Signature _____ Mobile No. _____
(2) _____ _____	(2) Signature _____ Mobile No. _____
(3) _____ _____	(3) Signature _____ Mobile No. _____

Dated :

Flying Squad report on this prescribed performa be sent immediately to Assistant Registrar, Conduct, Panjab University, Chandigarh or email : flying@pu.ac.in