

SPEED POST/OUT TODAY/
RTI MATTER/TIME BOUND

GOVT. OF NCT OF DELHI
DIRECTORATE OF TRAINING & TECHNICAL EDUCATION
MUNI MAYA RAM MARG, PITAMPURA, NEW DELHI
(RTI BRANCH)
(Ph. No. 27321024, Email:- piohqtte.delhi@gov.in)

NO.F.2 (16)/2006/RTI/TTE/ID No. 3988 | 1771-72
To

Dated: 15/6/16

Sh. Ajam Saufi
Dr. Kalsi Street, Sizer Gray Road
Khatina, U.S. Nagar, Uttarakhand-262308

Sub: Supply of information Under RTI Act-2005.

Sir/Madam,

With reference to your application dated 25/5/16 vide ID No. 3988 dated _____ addressed to the undersigned regarding supply of information under Right to Information Act 2005. The requisite information is enclosed as per Annexure.

The information was sought from AFT (Etag) (Custodian of Records) whose help was sought under section 5 (4) of the RTI Act, 2005, the information pertaining to this office is enclosed.

As per provisions of the Right to Information Act, 2005 u/s 19, an applicant, may if he/she is not satisfied, may file an appeal to the Ist Appellate Authority, with respect to the reply/information provided by the Public Information Officer within 30 days from the date of receipt of such reply/information from the Public Information Officer. The address of First Appellate Authority is as under:-

The First Appellate Authority,
Department of Training & Technical
Room No.103, Ist Floor,
Muni Maya Ram Marg, Pitampura
Delhi- 110034.

Yours faithfully,



(AMOD BARTH WAL)
PIO (RTI) DTTE

Encl. As above.

Copy to:-

✓ 1. The Assistant Programmer, DTTE with the request for upload the same on the Departmental Website.(Copy of RTI application is also enclosed)

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
DEPARTMENT OF TRAINING & TECHNICAL EDUCATION
MUNI MAYA RAM MARG, PITAMPURA, DELHI 110088.
[Exam Branch]

F. No. 15(60)/RTI/Trg.(E)/2016/ 177

Dated : 13 /06/2016

To


Sh. Ajam Saufi
Dr. Kalsi strret, Sitargang Road
Khatima, U.S Nagar,
Uttrakhand - 262308

Sub: Reply to RTI ID No 3988, dated 26.05.2016 filed by Sh.Ajam Saufi.

Sir,

With reference to your U.O No / RTI / TTE / ID NO. 3988 / 1629 dated 26.05.16. The requisite information sought by the applicant in the above said RTI is as under:

Answer: Photocopy of OMR answer sheet as sought by the applicant is enclosed herewith.


(R. K.Sharma)
A.I.T (Exam)

Copy to:

The PIO (RTI),
DTTE, (HQ),
Delhi.

981/1007
13/6/15

NAME OF TRAINEE (IN BLOCK LETTERS ONLY)

AJAM SAUFI

EXAMINATION CENTRE NAME (IN BLOCK LETTERS ONLY)

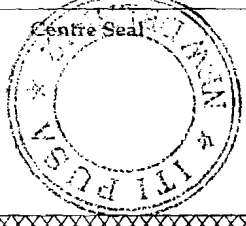
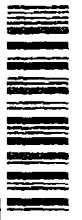
ITI PUSA CAMPUS

TRADE NAME (IN BLOCK LETTERS ONLY)

PHYSIOTHERAPY TECHNICIAN

DISTRICT NAME (IN BLOCK LETTERS ONLY)

NEW DELHI



INSTRUCTIONS

Use Black Ball Point Pen Only

- There is one correct answer for each question.
- Marks should be dark and completely fill the circle.
- Rough work must not be done on the answer sheet.
- Make the marks only in the circle space provided.
- Please do not make any stray marks on the answer sheet.

निर्देश

केवल काले बॉल प्वाइंट पेन का ही प्रयोग करें

- प्रत्येक प्रश्न के लिए एक सही जवाब है।
- वृत्त पूरी तरह से काला रंगा होना चाहिए।
- कोई भी रफ कार्य उत्तर पत्रक पर न करें।
- जो गोलें दिये गये हैं केवल उसी में भरें।
- उत्तर पत्रक पर कोई भी निशानी न बनायें।

Wrong Methods



Correct Method



गलत तरीके



सही तरीका



Exam. Date

0	0	1	6
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
0	0	0	0

Trade Code

0	2	1
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9
0	0	0

Semester

Ist

I II

III IV

Paper

Ist

I II

Booklet Series

B-1

A B C D

Session

Morning Evening

Roll Number

0	0	1	5	0	8	0	7	1	5	8	5	3	4
1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5	5	5
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7	7	7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9	9	9
0	0	0	0	0	0	0	0	0	0	0	0	0	0

PART - A

1	<input checked="" type="radio"/>	B	C	D	26	<input checked="" type="radio"/>	B	C	D
2	A	<input checked="" type="radio"/>	D	<input checked="" type="radio"/>	27	A	<input checked="" type="radio"/>	C	D
3	<input checked="" type="radio"/>	B	C	D	28	<input checked="" type="radio"/>	B	C	D
4	A	B	<input checked="" type="radio"/>	D	29	A	<input checked="" type="radio"/>	C	D
5	<input checked="" type="radio"/>	B	C	D	30	A	<input checked="" type="radio"/>	C	D
6	A	B	C	<input checked="" type="radio"/>	31	A	<input checked="" type="radio"/>	C	D
7	A	<input checked="" type="radio"/>	C	D	32	A	B	C	D
8	A	<input checked="" type="radio"/>	C	D	33	A	B	<input checked="" type="radio"/>	D
9	A	<input checked="" type="radio"/>	C	D	34	A	<input checked="" type="radio"/>	C	D
10	<input checked="" type="radio"/>	B	C	D	35	A	B	<input checked="" type="radio"/>	D
11	<input checked="" type="radio"/>	B	C	D	36	A	B	C	<input checked="" type="radio"/>
12	A	<input checked="" type="radio"/>	C	D	37	<input checked="" type="radio"/>	B	C	D
13	A	B	<input checked="" type="radio"/>	D	38	A	B	<input checked="" type="radio"/>	D
14	A	B	C	<input checked="" type="radio"/>	39	A	<input checked="" type="radio"/>	C	D
15	A	B	C	<input checked="" type="radio"/>	40	A	B	C	<input checked="" type="radio"/>

PART - B

1	<input checked="" type="radio"/>	B	C	D	16	A	B	<input checked="" type="radio"/>	D
2	A	B	C	<input checked="" type="radio"/>	17	A	B	<input checked="" type="radio"/>	D
3	<input checked="" type="radio"/>	B	C	D	18	A	<input checked="" type="radio"/>	C	D
4	A	B	C	<input checked="" type="radio"/>	19	<input checked="" type="radio"/>	B	C	D
5	<input checked="" type="radio"/>	B	C	D	20	<input checked="" type="radio"/>	B	C	D
6	<input checked="" type="radio"/>	B	C	D	21	A	<input checked="" type="radio"/>	C	D
7	A	B	C	<input checked="" type="radio"/>	22	<input checked="" type="radio"/>	<input checked="" type="radio"/>	C	D
8	<input checked="" type="radio"/>	B	C	D	23	<input checked="" type="radio"/>	B	C	D
9	A	B	C	<input checked="" type="radio"/>	24	<input checked="" type="radio"/>	B	C	D
10	<input checked="" type="radio"/>	C	D	<input checked="" type="radio"/>	25	A	B	<input checked="" type="radio"/>	D
11	A	<input checked="" type="radio"/>	C	D	26	A	B	C	<input checked="" type="radio"/>
12	<input checked="" type="radio"/>	B	C	D	27	A	B	C	<input checked="" type="radio"/>
13	A	B	<input checked="" type="radio"/>	D	28	A	B	C	<input checked="" type="radio"/>
14	A	B	<input checked="" type="radio"/>	D	29	A	B	C	<input checked="" type="radio"/>
15	A	<input checked="" type="radio"/>	C	D	30	A	B	C	<input checked="" type="radio"/>

Ajam Saifi

Munshi

RTI APPLICATION FORM

To,
The Public information Officer
Department of Training &
Technical Education,
Munni Maya Ram Marg, Pitampura
New Delhi-110034

3 P88 / 53 no
26/01/16

Sir,

Subject: Request for Information under Right to Information Act 2005.

I Sri / Smt / Ms. AJAM SAUFI

Son/Daughter/wife of Shri/Smt/ Ms. ERASHD HUSSAIN

resident of DR. KALSI STREET, SITARWANG ROAD KHATIMA, U.S NEGAR

telephone number (with STD Code) 9557435689 and/or mobile number: 8750353245 wish to seek information as under PIN No-262308 (Uttarakhand)

Copy of my OMR Sheet of Paper No1 (IT1), of AITT Feb 2016 Exam.
Name of ITI in which Studing: National Industrial Training Centre, Dwarka Mor, New Delhi-110059
Reg no of Portal R-150807158534 Roll No. of the Class PHYSIOTHERAPY TEC (350/2015-16)

I hereby inform that following formalities have been completed by me:

1. That I have deposited the requisite fee of Rs. 10/- by way of Postal Order issued in name of DDO, DTTE, Delhi Govt.
2. I need the photocopy of the documents and I had deposited the cost of the photocopy of Rs. 10/- by way of postal order issued in name of competent authority.
3. That I am 'Citizen' of India and I am asking the information as 'Citizen'.
4. I assure that I shall not allow/ cause to use/ pass/share/display/ or circulate the information received in any case and under any circumstances, with any person or in any manner which would be detrimental to the Unity and Sovereignty or against the Interest of India.

9/6/16
26/5/16

Ajam Saufi

Signature of the Applicant

Dated: 25/5/2016