

SURPRISE CHECK SQUAD REPORT (AT THE TIME OF VISIT)

1. Name & Center Code of the Institution Visited :
2. Name & Designation of Team Leader :
3. Name of the visiting Team Member :
4. Date and Time of Visit :
5. No. of Candidates Present :
6. No. of Candidates absent :
7. No. of Examination Halls :
8. Total No. of Invigilators drafted :
 - a) Internal Invigilators :
 - b) External Invigilators :
9. Name & Designation of Internal Flying squad :
10. Name & Designation of Observer :
allotted from SBTET
11. Signatures of Internal flying Squad, Observer :
& Invigilator Present at that time

Details	Name	Designation	Signature
Internal Flying squad			
Observer allotted from SBTET			
Invigilator			

12. Number of M.P. Cases Booked during surprise :
check with PINs
13. Hall Wise Candidates booked & Invigilators :
Details (if any)

Examination Hall	PIN	Name of the Candidate & Signature	Name Designation & Sign of the Invigilator

14. Whether the CC Cameras are Installed or Not? :
(If not bring it to the notice of the SBTET)
15. Whether the CC Cameras are working or Not? :
(If not bring it to the notice of the SBTET)

16. Whether the CC Cameras are recording properly or Not (Footage)?
(If not bring it to the notice of the SBTET)
17. Whether all the Examination Halls are :
arranged in the same floor & building (Yes/No)
18. Whether the Books, Cell Phones of the :
students/staff are deposited in a separate room
(Yes/No)
19. Any other Information (Please write NIL in below box if no remarks)

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Signature of Squad Team Leader

Signature of the Principal/CS with stamp