

Chief Invigilator	
Date of Examination	
Time of Examination	
Examination Venue	

Final Examination, Semester I / II	
Academic Session:	

CHIEF INVIGILATOR REPORT FORM

Examination Hall	Name of Invigilator	Clock-in time	Examination Course Code	Number of Registered Candidates	Number of Absentee(s)	Index No. of the Absent / Barred Candidates	Number of Answer Scripts	Answer Scripts' Collector

2. Report on Assi	stant Invigilator						
(a) No. of Assistant	Co	Comment/Suggestion [if any] :					
(b) Names of Assis	o did not report.	Co	Comment/Suggestion [if any] :				
(ii)							
(iii)							
(iv) (c) Assessment of the	the overall convice						
	atisfactory	Unsatisfactory Highly Unsatisfactory	Co	Comment/Suggestion (if any]:			
4. Other reports (e.g. Sick Candida	ate, Candidate Without	Examination Slip)				
For cheating/a		duct cases, please use	the UP/BLKM FORI	M (YELLOW	IN COLOUR)		
Index No.		Re	marks				
F Francis accept	:	staile of convection don.	. h., [.,aminar(a)				
Course Code	Question No.	etails of correction done Error(s)	e by Examiner(s)	Corre	ection(s)		
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6. Report on Exar	mination Hall						
Item		Satisfactory (√)	Average (√)		Unsatisfactory (√)		
(a) Hall Condition		, ,	<u> </u>		,		
(b) Cleanliness							
(c) Air-conditioning							
(d) Lights							
(e) Comment/Sugg	estion [if any]			1			
					T		
Chief Invigilator's Signature				Date			