



SINGLE BEST QUESTION PROFORMA

Stage 2 – Form
SEQ SUBMISSION FORM



TRUST US, WE BUILD

Undergraduate/	MBBS/DPT/Other.....	Post graduate	MD/MS/others
Date		Exam	
Name of Author		Designation	
Speciality		Area/Topic	
Theme		Sub-theme (objective)	
Reference (Name of book/Edition/Chapter/Page number /year			

QUESTION STEM (SCENARIO): Not more than 100 words

LEAD IN:

Questions

A.
B.
C.
D.
E.

KEY:

IMPORTANCE:Essential / Important / Supplementary

DIFFICULTY: Hard / Moderate / Easy

COGNITION LEVEL: C1 / C2 / C3

Author's Name:

Signature:

Date:

For office use only:

APPROVED AS SUCH CHANGES MADE AS ABOVE Not Approved

Reviewed by.....date...../...../.....

REVIEWER'S SIGNATURE

SIGNATURE INCHARGE PTS