

**SAMPLE QUESTION PAPER**  
**Class- XII**  
**Sub- PSYCHOLOGY**

**Time : 3 Hrs. 15 Minutes**

**Maximum Marks : 70**

**General Instructions :**

**সাধারণ নির্দেশাবলী :**

(১) প্রতিটি প্রশ্নই আবশ্যিক।

(২) সার্বিক ভাবে কোনও বিকল্প প্রশ্ন থাকবে না। তবে ৩ নম্বর মানের জন্য যে কোন অধ্যায়ের ৩টি প্রশ্নের এবং ৫ নম্বর মানের ক্ষেত্রে সবকটি প্রশ্নের একটি করে বিকল্প প্রশ্ন থাকবে।

(৩) 'খ' বিভাগ, 'গ' বিভাগ এবং 'ঘ' বিভাগের প্রতিটি প্রশ্নের উত্তরের জন্য যথাক্রমে ৩০টি শব্দ, ৬০টি শব্দ এবং ১৫০টি শব্দ পর্যন্ত সীমাবদ্ধ। তবে পরিসংখ্যানের ক্ষেত্রে শব্দ-সীমা প্রযোজ্য নয়।

**ক-বিভাগ**

- |     |  |   |
|-----|--|---|
| ১।  | 'বুদ্ধি হল বিমূর্ত চিন্তা করবার শক্তি'— বক্তা কে?                        | ১ |
| ২।  | 'Borderline' এর বুদ্ধ্যাঙ্কের প্রসার হল—(i) ৮০-৮৯ (ii) ৭০-৭৯ (iii) ৬০-৬৯ | ১ |
| ৩।  | কে গোষ্ঠীকে 'যুগল' এবং 'ত্রয়ী' গোষ্ঠীতে বিভাজন করেন?                    | ১ |
| ৪।  | কে প্রথম 'জ্ঞানমূলক- অসংগতি'র কথা বলেছেন?                                | ১ |
| ৫।  | MMPI-এর পুরো নাম লিখ।  | ১ |
| ৬।  | 'সংগতি বিধান' একটি ধারাবাহিক প্রক্রিয়া'- সত্য না মিথ্যা                 | ১ |
| ৭।  | GAS model-এর শেষ স্তর কোনটি?   | ১ |
| ৮।  | 'DSM-IV'-এ মোট কয়টি অক্ষ আছে?   | ১ |
| ৯।  | 'Adolescence' শব্দটি গ্রীক শব্দ— থেকে নেওয়া হয়েছে।                     | ১ |
| ১০। | পরিবেশের মৌলিক প্রকারভেদগুলি কি কি?                                      | ১ |
| ১১। | কোন 'কার্টিক বন্টন'টি স্বাভাবিক বন্টন রেখার অন্তর্গত।                    | ১ |

**খ-বিভাগ**

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|-----|--|---|
| ১২। | মানসিক বয়স বলতে কি বোঝ?   | ২ |
| ১৩। | 'প্রথানুসারী আচরণ' কি?   | ২ |
| ১৪। | মনোভাব গঠনে Cultural Norm-এর গুরুত্ব কি?   | ২ |
| ১৫। | 'অবাধ অনুযজ্ঞ' সম্পর্কে লিখ।   | ২ |
| ১৬। | 'প্রক্ষেপন' কি?  | ২ |
| ১৭। | 'আকর্ষণ-বিকর্ষণ' দ্বন্দের সংজ্ঞা লিখ।  | ২ |
| ১৮। | 'অবাস্তব চিন্তন' (delusion) এবং 'অবাস্তব প্রত্যক্ষণ' (hallucination) এর মধ্যে পার্থক্য নির্ণয় কর। | ২ |
| ১৯। | Gender Stability বলতে কি বোঝ?  | ২ |
| ২০। | 'পরিবেশ শিক্ষা'র দুটি উদ্দেশ্য লিখ।  | ২ |
| ২১। | 'সহগতি'র প্রকারভেদ সম্পর্কে লিখ।   | ২ |

**গ-বিভাগ**

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|-----|---|---|
| ২২। | অনগ্রসর-শিশুদের সমস্যা সমাধানের যে কোন তিনটি উপায় লিখ। | ৩ |
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অথবা

থর্নডাইকের মতে বুদ্ধির বিভিন্ন প্রকারভেদ সম্পর্কে লিখ।

- ২৩। 'সামাজিক-শিক্ষা' কি ভাবে 'prejudice'-এর উৎস হিসাবে কাজ করে? ৩
- ২৪। ব্যক্তিত্ব নিরূপণের ক্ষেত্রে সাম্প্রতিক পদ্ধতিটি সম্বন্ধে আলোচনা কর? ৩
- ২৫। C.J. Jung প্রদত্ত ব্যক্তিত্বের টাইপ বর্ণনা কর। ৩
- ২৬। শিক্ষার্থীদের ক্ষেত্রে counselling-এর উপযোগিতা কি? ৩

অথবা

সুষ্ঠু সংগতি সাধনের যেকোন তিনটি লক্ষণ লিখ।

- ২৭। Stress management-এর ক্ষেত্রে Meditation-এর গুরুত্ব আলোচনা কর। ৩
- ২৮। Erikson-এর মতে মন:সামাজিক বিকাশের স্তর কয়টি? মন:সামাজিক বিকাশের তৃতীয় স্তরটি আলোচনা কর। ১ + ২

অথবা

স্বরূপত্ব বিকাশের প্রভাব বিস্তারকারী উপাদান হিসাবে 'পরিবার' এর ভূমিকা আলোচনা কর।

- ২৯। পরিবেশের সঙ্গে মানুষের সম্পর্ক ব্যাখ্যা কর। ৩

ঘ-বিভাগ

- ৩০। 'প্রাথমিক গোষ্ঠী' ও 'মাধ্যমিক গোষ্ঠী'র মধ্যে পার্থক্য নিরূপণ কর। ৫

অথবা

'নেতৃত্ব'র যে কোন পাঁচটি প্রকারভেদ সম্পর্কে আলোচনা কর। ৫

- ৩১। 'অসামাজিক ব্যত্যয়'-এর যে কোন পাঁচটি কারণ লিখ। ৫

অথবা

সিজোফ্রেনিয়া-র প্রকারভেদগুলি আলোচনা কর। ৫

- ৩২। 'স্বাভাবিক বন্টন রেখা' কি? স্বাভাবিক বন্টন রেখার বৈশিষ্ট্যগুলি কি কি? ২ + ৩

অথবা

নিম্নলিখিত পরিসংখ্যা বিভাজনের সাহায্যে একটি আয়তলেখ (histogram) অঙ্কন কর-

Class interval	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54
f	3	4	2	8	14	9	6	4

MANUAL  
**INSTRUCTIONS**

The Adjustment Inventory has four parts. Each part has 35 statements. In the Right side of each statement 'Yes', and 'No' have been given. If you agree with the statement or to the facts mentioned in the statement  'Yes'. If your answer is negative, i.e., your are not agreeing to the facts mentioned in the statement  'No'. There is no time limit, but should answer all the items quickly.

**SCORING**

Scoring of the inventory is most easy. You have to count the number of responses where the individual has 'Yes' only. For each 'Yes' responses 1 Score is to be given. The total number of 'Yes' scores thus make total score of the individual in the part.

Yes	1
No	0

You are not concerned to the 'No' response.

The inventory is totally negative inventory. When an individual answers in 'Yes', it indicates his difficulties. If he answers in 'No', it indicates that the individual has no such difficulty. His answer is neither affirmative nor negative towards difficulties. Therefore, only 'Yes' responses are scored to measure Adjustment difficulty.

**STANDARDIZATION**

The inventory has been normalised in terms of Mean and Standard Deviation and secondly, in terms of grade norms.

**Mean and S.D. for Boys and Girls**

Sl. No.	Areas	Sex	High School		Intermediate		Graduate		Postgraduate	
			M	S.D.	M	S.D.	M	S.D.	M	S.D.
1.	Home	Boys	9.74	3.20	10.17	3.92	9.00	3.96	10.02	3.90
		Girls	10.86	4.76	9.96	4.50	10.34	3.92	10.39	3.59
2.	Health	Boys	8.00	4.13	7.98	4.01	8.60	3.06	5.00	3.45
		Girls	7.35	4.00	8.64	4.90	7.93	3.69	7.56	3.98
3.	Social	Boys	9.92	3.73	10.34	4.00	9.97	4.01	8.79	4.01
		Girls	8.76	3.85	7.98	4.05	8.93	4.12	7.04	3.98
4.	Emotional	Boys	9.01	4.34	8.97	5.00	7.98	4.12	6.98	3.49
		Girls	7.98	4.62	10.78	4.43	10.00	4.74	10.34	4.26

GENERAL NORMS  
Classification of Adjustment in Temrs of Categories  
**HIGH SCHOOL STUDENTS**

INTERPRETATION	RANGE OF SCORES			
	Home	Health	Social	Emotional
Excellent	4 & below	2 & below	6 & below	1 & below
Good	5 - 7	3 - 4	7 - 9	2 - 4
Average	8 - 14	5 - 9	10 - 16	5 - 11
Unsatisfactory	15 - 17	10 - 11	17 - 19	12 - 14
<b>Very Unsatisfactory</b>	<b>18 &amp; above</b>	<b>12 &amp; above</b>	<b>20 &amp; above</b>	<b>15 &amp; above</b>

**INTERMEDIATE STUDENTS**

INTERPRETATION	RANGE OF SCORES			
	Home	Health	Social	Emotional
Excellent	5 & below	2 & below	5 & below	1 & below
Good	6 - 7	3 - 4	6 - 8	2 - 4
Average	8 - 12	5 - 9	9 - 15	5 - 13
Unsatisfactory	13 - 14	10 - 11	16 - 18	14 - 17
Very Unsatisfactory	15 & above	12 & above	19 & above	18 & above

### DEGREE STUDENTS

INTERPRETATION	RANGE OF SCORES			
	Home	Health	Social	Emotional
Excellent	3 & below	below 1	6 & below	2 & below
Good	4 - 6	1 - 3	7 - 9	3 - 5
Average	7 - 13	4 - 10	10 - 16	6 - 12
Unsatisfactory	14 - 16	11 - 13	17 - 19	13 - 15
<b>Very Unsatisfactory</b>	<b>17 &amp; above</b>	<b>14 &amp; above</b>	<b>20 &amp; above</b>	<b>16 &amp; above</b>

### POST-GRADUATE STUDENTS

INTERPRETATION	RANGE OF SCORES			
	Home	Health	Social	Emotional
Excellent	4 & below	below 1	6 & below	below 1
Good	5 - 7	1 - 3	7 - 9	1 - 3
Average	8 - 14	4 - 10	10 - 16	4 - 12
Unsatisfactory	15 - 17	11 - 13	17 - 19	13 - 16
Very Unsatisfactory	18 & above	14 & above	20 & above	17 & above

Please fill in the following informations :-

Date

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Name \_\_\_\_\_

Age \_\_\_\_\_ Sex \_\_\_\_\_

Class \_\_\_\_\_

Father's occupation \_\_\_\_\_ Education \_\_\_\_\_

Monthly Income \_\_\_\_\_

### INSTRUCTIONS

This inventory consists of four parts. 35 statements are given in each part. Two alternatives 'Yes' and 'No' are given against each statement. If you wish to answer the statement in 'Yes' i.e. you agree with the facts given in the statement then put a cross  in the box given below 'Yes'. If your answer is negative i.e. you do not agree with the facts given in the statement then put a cross  in the box given below 'No. Though there is no time limit, still try to answer all the statements quickly.

### SCORING TABLE

Area →	I	II	III	IV
Scores				
Interpretation				

Sl. No.	STATEMENTS	Yes	No.
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**PART - I**

1.	Have you ever had a firm idea of absconding the home?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you ever feel that your parents are not satisfied with you?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are you sad with the works done by your father to run your family?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Do your mother have supremacy in your family?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Hs anyone among your mother-father ever condemn you in vain?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you think that there is no true affection in the family?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you always have good relations with your father?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do your parents stress upon obeying them instead of paying attention to your matters.	<input type="checkbox"/>	<input type="checkbox"/>
9.	Being your family life sorrowful, has anyone in your family become ill or died?	<input type="checkbox"/>	<input type="checkbox"/>
10.	Does your home appear to you sorrowful because of shortage of money?	<input type="checkbox"/>	<input type="checkbox"/>
11.	Have your parents ever suspected your character?	<input type="checkbox"/>	<input type="checkbox"/>
12.	Do your parents forbl'd you to remain with such type of friends you remain with?	<input type="checkbox"/>	<input type="checkbox"/>
13.	Do your mother or father irritates soon?	<input type="checkbox"/>	<input type="checkbox"/>
14.	Do you mostly remain disagreeable with your parents regarding the process of work at home?	<input type="checkbox"/>	<input type="checkbox"/>
15.	Do familly quarrels usually occur between your relations?	<input type="checkbox"/>	<input type="checkbox"/>
16.	Do you mostly keep on quarrelling with your brothers and sisters?	<input type="checkbox"/>	<input type="checkbox"/>
17.	Do your parents understand you to be a child and do not think that you have grown up now?	<input type="checkbox"/>	<input type="checkbox"/>
18.	Do you feel that your parents are unnecessarily strict with you?	<input type="checkbox"/>	<input type="checkbox"/>
19.	Does any of your parents have any peculiar habit which you hate?	<input type="checkbox"/>	<input type="checkbox"/>
20.	Do you love your mother more than your father?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Have you to leave your house or keep quiet for maintaining peace in the family?	<input type="checkbox"/>	<input type="checkbox"/>
22.	Have your parents created great fear in your mind for any specific work?	<input type="checkbox"/>	<input type="checkbox"/>

SI. No.	STATEMENTS	Yes	No.
23.	Do you sometime feel angry and sometime happy upon your family members according to the time?	<input type="checkbox"/>	<input type="checkbox"/>
24.	Does your mother love you very much?	<input type="checkbox"/>	<input type="checkbox"/>
25.	Does your mother love you very much?	<input type="checkbox"/>	<input type="checkbox"/>
26.	Do all the essential things exist in your house?	<input type="checkbox"/>	<input type="checkbox"/>
27.	Do the ideals of life of your father match with your ideals?	<input type="checkbox"/>	<input type="checkbox"/>
28.	Have your parents ever provoked you for your personal figure and colour?	<input type="checkbox"/>	<input type="checkbox"/>
29.	Do the ideas of your mother-father not match with each other?	<input type="checkbox"/>	<input type="checkbox"/>
30.	Did your parents often beat you between the age of 1- and 15 years?	<input type="checkbox"/>	<input type="checkbox"/>
31.	Are you not in agreement with the ideas of your parents regarding your aims of life?	<input type="checkbox"/>	<input type="checkbox"/>
32.	Is any of your mother-father of irritant habit?	<input type="checkbox"/>	<input type="checkbox"/>
33.	Do your mother or father keep you in strict control?	<input type="checkbox"/>	<input type="checkbox"/>
34.	Do you ever think that your parents are unable to understand you?	<input type="checkbox"/>	<input type="checkbox"/>
35.	Do you feel that the family lives of your friends are more pleasant than yours?	<input type="checkbox"/>	<input type="checkbox"/>



SI. No.	STATEMENTS	Yes	No.
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**PART - II**

1.	Do you get afraid soon with others?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do your eyes feel difficulty in facing very bright light?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Are you a patient of asthma or malaria etc.?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Have you ever had Diphtheria or high fever in childhood?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do you always remain afflicted by headache?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you feel difficulty in sleeping when there is any kind of noise in house?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you usually feel more tired at the end of the day?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Have you reduced some of your body weight these days?	<input type="checkbox"/>	<input type="checkbox"/>
9.	Have you ever had serious injury in any accident?	<input type="checkbox"/>	<input type="checkbox"/>
10.	Have you ever had any surgical operation?	<input type="checkbox"/>	<input type="checkbox"/>
11.	Do you feel much cold?	<input type="checkbox"/>	<input type="checkbox"/>
12.	Do you usually get afflicted with influenza?	<input type="checkbox"/>	<input type="checkbox"/>
13.	Did you ever become seriously ill during last ten years?	<input type="checkbox"/>	<input type="checkbox"/>
14.	Are you suffering from the problems of gas?	<input type="checkbox"/>	<input type="checkbox"/>
15.	Do you feel giddiness?	<input type="checkbox"/>	<input type="checkbox"/>
16.	Do your eyes pain usually?	<input type="checkbox"/>	<input type="checkbox"/>
17.	Do you feel tiredness when you wake-up in the morning?	<input type="checkbox"/>	<input type="checkbox"/>
18.	Do you often take medicines?	<input type="checkbox"/>	<input type="checkbox"/>
19.	Do you usually feel like tired?	<input type="checkbox"/>	<input type="checkbox"/>
20.	Do you usually get indigestion problem?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Do you usually get sour throat?	<input type="checkbox"/>	<input type="checkbox"/>
22.	Do you usually have disease of vomiting or diarrhoea?	<input type="checkbox"/>	<input type="checkbox"/>
23.	Do you have much problem of constipation?	<input type="checkbox"/>	<input type="checkbox"/>
24.	Have you been too much ill during your childhood?	<input type="checkbox"/>	<input type="checkbox"/>
25.	Do you feel difficulty in breathing with nose?	<input type="checkbox"/>	<input type="checkbox"/>

SI. No.	STATEMENTS	Yes	No.
26.	Do you ever have sharp headache?	<input type="checkbox"/>	<input type="checkbox"/>
27.	Is your body weight less than an average?	<input type="checkbox"/>	<input type="checkbox"/>
28.	Do you usually take your food before feeling hungry?	<input type="checkbox"/>	<input type="checkbox"/>
29.	Do you use spectacles?	<input type="checkbox"/>	<input type="checkbox"/>
30.	Do you think necessary to take care of your health?	<input type="checkbox"/>	<input type="checkbox"/>
31.	Are your usually absent because of illness?	<input type="checkbox"/>	<input type="checkbox"/>
32.	Are you teeth such that you feel necessity for medication?	<input type="checkbox"/>	<input type="checkbox"/>
33.	Do you have any trouble in heart, lungs or kidney?	<input type="checkbox"/>	<input type="checkbox"/>
34.	Have you ever had skin disease?	<input type="checkbox"/>	<input type="checkbox"/>
35.	Do you have trouble in getting rid of cold?	<input type="checkbox"/>	<input type="checkbox"/>

**PART - III**

1.	Do you enjoy social gatherings just to meet the persons?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Do you like to meet the chief guest while attending any reception function?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you take responsibility of introducing persons while attending such functions?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Do you feel difficulty in giving proper answer while taking part in group conversation?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Have you been leader of any party?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you hesitate in going into any meeting when all the persons have seated?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Can you deliver speech in the presence of all in the class?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you keep on talking with your fellow travellers while travelling by rail or bus?	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you feel easy in asking help from others?	<input type="checkbox"/>	<input type="checkbox"/>
10.	Do you get harassed with your shyness?	<input type="checkbox"/>	<input type="checkbox"/>
11.	Do you enjoy in starting conversation in public?	<input type="checkbox"/>	<input type="checkbox"/>
12.	Do you have experience of planning and directing the works of public?	<input type="checkbox"/>	<input type="checkbox"/>
13.	Do you feel difficulty in talking with any new unknown person?	<input type="checkbox"/>	<input type="checkbox"/>
14.	Do you find yourself unable in answering in the class even remembering the answer?	<input type="checkbox"/>	<input type="checkbox"/>

Sl. No.	STATEMENTS	Yes	No.
15.	Do you feel easy in having friendship with opposite sex person?	<input type="checkbox"/>	<input type="checkbox"/>
16.	Would you like to do work for others instead of asking others to do work for you if you are given a dinner?	<input type="checkbox"/>	<input type="checkbox"/>
17.	Do you have experience in delivering speech in meetings?	<input type="checkbox"/>	<input type="checkbox"/>
18.	Do you have difficulty in delivering speech in presence of persons?	<input type="checkbox"/>	<input type="checkbox"/>
19.	Do you enjoy social dances more?	<input type="checkbox"/>	<input type="checkbox"/>
20.	Will you prefer to go personally and take something you want from an unknown person instead of writing a letter or asking any other person to bring it?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Do you feel self-respect in living with the persons you admire most and not known fully?	<input type="checkbox"/>	<input type="checkbox"/>
22.	Have you ever been a leader of any social programme?	<input type="checkbox"/>	<input type="checkbox"/>
23.	Do you move sideways on road to side the eye-sight of any specific person?	<input type="checkbox"/>	<input type="checkbox"/>
24.	Will you prefer to stand or come back on reaching late in any meeting instead of sitting in front?	<input type="checkbox"/>	<input type="checkbox"/>
25.	Do you make friends with readiness?	<input type="checkbox"/>	<input type="checkbox"/>
26.	Are you leader in any party?	<input type="checkbox"/>	<input type="checkbox"/>
27.	Do you prefer to have heartily friendship with some specific persons instead of having acquaintance with more persons?	<input type="checkbox"/>	<input type="checkbox"/>
28.	Do you feel disheartend in seeking permission for leaving any specific party of persons if you wish to leave it?	<input type="checkbox"/>	<input type="checkbox"/>
29.	Do you lag behind in social functions?	<input type="checkbox"/>	<input type="checkbox"/>
30.	Do you get perplexed all together, if any teacher calls you all of a sudden?	<input type="checkbox"/>	<input type="checkbox"/>
31.	Do you feel difficult to talk with a stranger?	<input type="checkbox"/>	<input type="checkbox"/>
32.	Are you delighted in taking part in fairs and gatherings?	<input type="checkbox"/>	<input type="checkbox"/>
33.	Do you understand self-respect in speaking on any thing in the class?	<input type="checkbox"/>	<input type="checkbox"/>
34.	Do you hesitate in speaking in the class?	<input type="checkbox"/>	<input type="checkbox"/>
35.	Do you hesitate in entering the room if some persons are talking with each other there?	<input type="checkbox"/>	<input type="checkbox"/>

Sl. No.	STATEMENTS	Yes	No.
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**PART - IV**

1.	Do you day-dream?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Does testing by doctor for any disease frightens you?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Do you sometimes get sad for unknown reasons?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Have you ever felt that someone may hypnotise you and make you work against your will?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Do you feel lonely while staying in a crowd?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Do you feel tired at the end of the day?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Do you get frightened with the idea of earthquake or fire?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do tears in you eyes come soon?	<input type="checkbox"/>	<input type="checkbox"/>
9.	Do you get frightened on seeing a snake?	<input type="checkbox"/>	<input type="checkbox"/>
10.	Have your been convicted even if you are not guilty?	<input type="checkbox"/>	<input type="checkbox"/>
11.	Does lightning frighten you?	<input type="checkbox"/>	<input type="checkbox"/>
12.	Do you get discouraged repeatedly on securing less marks in examinations?	<input type="checkbox"/>	<input type="checkbox"/>
13.	Do you feel jealous of others being happy?	<input type="checkbox"/>	<input type="checkbox"/>
14.	Do you loose courage very easily?	<input type="checkbox"/>	<input type="checkbox"/>
15.	Do you usually feel sad upon your acts?	<input type="checkbox"/>	<input type="checkbox"/>
16.	Have you ever got frightened of falling down after climbing a high mountain?	<input type="checkbox"/>	<input type="checkbox"/>
17.	Do you get angry very soon?	<input type="checkbox"/>	<input type="checkbox"/>
18.	Do you usualy remain sad?	<input type="checkbox"/>	<input type="checkbox"/>
19.	Do you get perplexed with the feeling of inferiority?	<input type="checkbox"/>	<input type="checkbox"/>
20.	Do you understand yourself strong?	<input type="checkbox"/>	<input type="checkbox"/>
21.	Do you easily get shy?	<input type="checkbox"/>	<input type="checkbox"/>
22.	Do you feel troubled with any hearsay?	<input type="checkbox"/>	<input type="checkbox"/>
23.	Does your feeling get hurt with any hearsay?	<input type="checkbox"/>	<input type="checkbox"/>
24.	Do you become troubled with probable difficulties?	<input type="checkbox"/>	<input type="checkbox"/>
25.	Do you ever get worried for the persons may not read your ideas?	<input type="checkbox"/>	<input type="checkbox"/>

SI. No.	STATEMENTS	Yes	No.
26.	Do you ever have an idea that persons are sepying you on the road?	<input type="checkbox"/>	<input type="checkbox"/>
27.	Do you get much troubled on hearing complaints?	<input type="checkbox"/>	<input type="checkbox"/>
28.	Do you usually get irritated?	<input type="checkbox"/>	<input type="checkbox"/>
29.	Do you sometimes have useless ideas in your brain and feel distressed with them?	<input type="checkbox"/>	<input type="checkbox"/>
30.	Do you get agitated soon?	<input type="checkbox"/>	<input type="checkbox"/>
31.	Do you get too much distressed with your experiences of poverty?	<input type="checkbox"/>	<input type="checkbox"/>
32.	Do you get too much frightened with a person even knowing that he cannot harm you?	<input type="checkbox"/>	<input type="checkbox"/>
33.	Do you get happy and sad on and of without any specific reason?	<input type="checkbox"/>	<input type="checkbox"/>
34.	Do you ever have an idea of your being unable to sleep?	<input type="checkbox"/>	<input type="checkbox"/>
35.	Do you fear in living alone in dark?	<input type="checkbox"/>	<input type="checkbox"/>

# SAMPLE QUESTION PAPER

## PSYCHOLOGY

CLASS-XII

### General Instructions

1. All the questions are compulsory.
2. There is no internal choice except 3 questions of 3 marks and all the questions of 5 marks weightage.
3. The word limit for Group-B is 30 words, Group-C 60 words and Group-D 150 words. Word limit is not applicable in case of statistics.

### Group- A

1. "Intelligence is the ability of abstract thinking"- Who said this? 1
2. The IQ of the "Borderline" ranges from- i) 80-89 ii) 70-79 iii) 60-69 1
3. Who classified the group into "dyad" and "triad" group? 1
4. Who first stated the concept of "cognitive dissonance"? 1
5. Write the full form of MMPI. 1
6. "Adjustment is a continuous process"- True/False 1
7. What is the last stage of GAS model? 1
8. How many "Axis" are there in DSM IV? 1
9. The term 'Adolescence" has been derived from the Greek word ..... 1
10. What are the basic types of environment? 1
11. Which type of kurtic distribution is normal probability curve? 1

### Group- B

12. What is meant by Mental Age? 2
13. What is "conformity"? 2
14. Write the importance of "Cultural Norm" in formation of attitude. 2
15. Discuss about "Free Association Method". 2
16. What is "Projection"? 2
17. Define "Approach-Avoidance Conflict". 2
18. Distinguish between "Hallucination" and "Delusion"? 2
19. What do you mean by gender stability? 2
20. Discuss any two objectives of Environmental Education. 2
21. What are the different types of correlation? 2

### Group- C

22. Write any 3 measures to solve the problems of backward children. 3

OR

- Write about the different types of intelligence according to Thorndike. 3
23. How does social learning act as a source of prejudice? 3
24. Discuss about "interview" as a method of measuring personality. 3
25. Describe the personality type as advocated by C.G. Jung. 3
26. What is the utility of counseling among the students? 3

OR

- Write any 3 criteria of "Good Adjustment"? 3

27. Discuss the importance of meditation in case of stress management. 3
28. How many stages of psycho-social development are there according to Erikson? Discuss the third stage of the psycho-social development. 1+2

OR

- Discuss the role of family as a factor which influences the identity development. 3
29. Define the relationship between man and environment. 3

**Group- D**

30. Differentiate between primary group and secondary group. 5

OR

Discuss in brief any five types of leadership. 5

31. Delineate any 5 causes of antisocial disorder. 5

OR

Describe about the different types of schizophrenia. 5

32. What is Normal Probability Curve? What are the characteristics of Normal Probability Curve? 2+3

OR

Construct a histogram with the help of the following distribution: 5