

Do not write in this box

Candidate Name
If not already printed, write name
in CAPITALS and complete the
Candidate No. grid (in pencil).

Centre No.

Candidate Signature

Candidate No.

Examination Title

**Examination
Details**

Centre

Supervisor:

If the candidate is ABSENT or has WITHDRAWN shade here

0	0	0	0
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

Candidate Answer Sheet 1

Instructions

Use a PENCIL (B or HB). Rub out any answer you wish to change using an eraser.

Part 1: Mark ONE letter for each question.

For example, if you think B is the right answer to the question, mark your answer sheet like this:



Parts 2, 3 and 4: Write your answer clearly in CAPITAL LETTERS.

For Parts 2 and 3 write one letter in each box. For example:



Part 1

1	A	B	C	D
2	A	B	C	D
3	A	B	C	D
4	A	B	C	D
5	A	B	C	D
6	A	B	C	D
7	A	B	C	D
8	A	B	C	D

Part 2

9		9	1	0	u
10		10	1	0	u
11		11	1	0	u
12		12	1	0	u
13		13	1	0	u
14		14	1	0	u
15		15	1	0	u
16		16	1	0	u

Continues over →

Part 3

17		17	1	0	u
18		18	1	0	u
19		19	1	0	u
20		20	1	0	u
21		21	1	0	u
22		22	1	0	u
23		23	1	0	u
24		24	1	0	u

Part 4

25		25	2	1	0	u
26		26	2	1	0	u
27		27	2	1	0	u
28		28	2	1	0	u
29		29	2	1	0	u
30		30	2	1	0	u