



Candidate Name

Centre Name

Examination Title

Candidate Signature

Candidate Number

Centre Number

Examination Details

Assessment Date

Supervisor: If the candidate is ABSENT or has WITHDRAWN shade here

Key for Schools Listening Candidate Answer Sheet

Instructions

Use a PENCIL (B or HB).

Rub out any answer you want to change with an eraser.

For Parts 1, 3, 4 and 5:

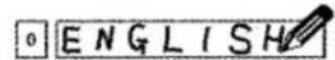
Mark ONE letter for each answer.

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



For Part 2:

Write your answers clearly in the spaces next to the numbers (6 to 10) like this:



Write your answers in CAPITAL LETTERS.

Part 1			
1	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Part 2			Do not write below here
6	<input type="text"/>	6	1 0 <input type="radio"/> <input type="radio"/>
7	<input type="text"/>	7	1 0 <input type="radio"/> <input type="radio"/>
8	<input type="text"/>	8	1 0 <input type="radio"/> <input type="radio"/>
9	<input type="text"/>	9	1 0 <input type="radio"/> <input type="radio"/>
10	<input type="text"/>	10	1 0 <input type="radio"/> <input type="radio"/>

Part 3			
11	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Part 4			
16	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
17	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
18	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
19	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
20	A	B	C
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Part 5								
21	A	B	C	D	E	F	G	H
	<input type="radio"/>							
22	A	B	C	D	E	F	G	H
	<input type="radio"/>							
23	A	B	C	D	E	F	G	H
	<input type="radio"/>							
24	A	B	C	D	E	F	G	H
	<input type="radio"/>							
25	A	B	C	D	E	F	G	H
	<input type="radio"/>							