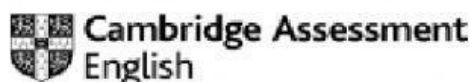




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Candidate Name Candidate Number Centre Name Centre Number Examination Title Examination Details Candidate Signature Assessment Date Supervisor: If the candidate is ABSENT or has WITHDRAWN shade here ☐**Preliminary for Schools Listening Candidate Answer Sheet****Instructions**

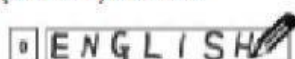
Use a PENCIL (B or HB). Rub out any answer you want to change with an eraser.

For Parts 1, 2 and 4:

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 3:**

Write your answers clearly in the spaces next to the numbers (14 to 19) like this:



Write your answers in CAPITAL LETTERS.

Part 1

1	A	B	C
	☐	☐	☐
2	A	B	C
	☐	☐	☐
3	A	B	C
	☐	☐	☐
4	A	B	C
	☐	☐	☐
5	A	B	C
	☐	☐	☐
6	A	B	C
	☐	☐	☐
7	A	B	C
	☐	☐	☐

Part 2

8	A	B	C
	☐	☐	☐
9	A	B	C
	☐	☐	☐
10	A	B	C
	☐	☐	☐
11	A	B	C
	☐	☐	☐
12	A	B	C
	☐	☐	☐
13	A	B	C
	☐	☐	☐

Part 3

14		Do not write below here
		14 1 0
		☐
15		15 1 0
		☐
16		16 1 0
		☐
17		17 1 0
		☐
18		18 1 0
		☐
19		19 1 0
		☐

Part 4

20	A	B	C
	☐	☐	☐
21	A	B	C
	☐	☐	☐
22	A	B	C
	☐	☐	☐
23	A	B	C
	☐	☐	☐
24	A	B	C
	☐	☐	☐
25	A	B	C
	☐	☐	☐

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