

[illegible]

IELTS Listening and Reading Answer Sheet

Centre number:

Pencil must be used to complete this sheet.

Please write your **full name** in CAPITAL letters on the line below:

Then write your six digit Candidate number in the boxes and shade the number in the grid on the right.

[illegible]

0 1 2 3 4 5 6 7 8 9

0 1 2 3 4 5 6 7 8 9

	0	1	2	3	4	5	6	7	8	9
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[illegible]

0 1 2 3 4 5 6 7 8 9

Test date (shade ONE box for the day, ONE box for the month and ONE box for the year):

Day: 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31

Month: 01 02 03 04 05 06 07 08 09 10 11 12 Year (last 2 digits): 09 10 11 12 13 14 15 16 17 18

Listening		Listening	Listening	Listening	Listening	Listening
		Marker use only	Marker use only			
1		✓ 1 ✕ □ □	21		✓ 21 ✕ □ □	
2		✓ 2 ✕ □ □	22		✓ 22 ✕ □ □	
3		✓ 3 ✕ □ □	23		✓ 23 ✕ □ □	
4		✓ 4 ✕ □ □	24		✓ 24 ✕ □ □	
5		✓ 5 ✕ □ □	25		✓ 25 ✕ □ □	
6		✓ 6 ✕ □ □	26		✓ 26 ✕ □ □	
7		✓ 7 ✕ □ □	27		✓ 27 ✕ □ □	
8		✓ 8 ✕ □ □	28		✓ 28 ✕ □ □	
9		✓ 9 ✕ □ □	29		✓ 29 ✕ □ □	
10		✓ 10 ✕ □ □	30		✓ 30 ✕ □ □	
11		✓ 11 ✕ □ □	31		✓ 31 ✕ □ □	
12		✓ 12 ✕ □ □	32		✓ 32 ✕ □ □	
13		✓ 13 ✕ □ □	33		✓ 33 ✕ □ □	
14		✓ 14 ✕ □ □	34		✓ 34 ✕ □ □	
15		✓ 15 ✕ □ □	35		✓ 35 ✕ □ □	
16		✓ 16 ✕ □ □	36		✓ 36 ✕ □ □	
17		✓ 17 ✕ □ □	37		✓ 37 ✕ □ □	
18		✓ 18 ✕ □ □	38		✓ 38 ✕ □ □	
19		✓ 19 ✕ □ □	39		✓ 39 ✕ □ □	
20		✓ 20 ✕ □ □	40		✓ 40 ✕ □ □	

Marker 2	
Initials	

Marker 1	
Initials	

Band Score	
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Listening	
Total	