



Candidate Name	<input type="text"/>
Centre Name	<input type="text"/>
Examination Title	<input type="text"/>
Candidate Signature	<input type="text"/>

Candidate Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Centre Number	<input type="text"/> <input type="text"/>
Examination Details	<input type="text"/>
Assessment Date	<input type="text"/>

Supervisor: If the candidate is ABSENT or has WITHDRAWN shade here ☐

Preliminary Reading 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, 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:



Part 1	
1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>
4	<input type="text"/>
5	<input type="text"/>

Part 2	
6	<input type="text"/>
7	<input type="text"/>
8	<input type="text"/>
9	<input type="text"/>
10	<input type="text"/>

Part 3	
11	<input type="text"/>
12	<input type="text"/>
13	<input type="text"/>
14	<input type="text"/>
15	<input type="text"/>


Part 4	
16	<input type="text"/>
17	<input type="text"/>
18	<input type="text"/>
19	<input type="text"/>
20	<input type="text"/>

Part 5	
21	<input type="text"/>
22	<input type="text"/>
23	<input type="text"/>
24	<input type="text"/>
25	<input type="text"/>
26	<input type="text"/>

Continues over ➡

For Part 6:

Write your answers clearly in the spaces next to the numbers (27 to 32) like this:

0 ENGLISH 

Write your answers in CAPITAL LETTERS.

Part 6

Do not write
below here

27

27 1 0
☐ ☐

28

28 1 0
☐ ☐

29

29 1 0
☐ ☐

30

30 1 0
☐ ☐

31

31 1 0
☐ ☐

32

32 1 0
☐ ☐