

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.



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
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

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): 13 14 15 16 17 18 19 20 21

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 Signature	Marker 1 Signature	Listening Total
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Please write your **full name** in CAPITAL letters on the line below:

Please write your Candidate number on the line below:

Please write your three digit language code in the boxes and shade the numbers in the grid on the right.



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



Are you: Female? ☐ Male? ☐

Reading Reading Reading Reading Reading Reading

Module taken (shade one box):

Academic ☐

General Training ☐

	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
Signature

Marker 1
Signature

Reading
Total

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