



Student's Name: .....

**PART 01**

**Questions 1-10**

Complete the notes below.

Write ONE WORD AND/OR A NUMBER for each answer.

**DRIVING SCHOOL**

<i>Example</i>	<i>Answer</i>
<i>Looking for driving lessons given during the:</i>	<i>weekends</i>
Address:	1..... Road
Drive:	the city center 2..... above the city
Teacher's name:	Allen 3.....
Popular type of car on roads:	4.....
Best time to take lessons:	practice during the 5.....
Safety driving depends on:	good 6.....
Obtain:	a driving 7.....
Final test fee:	\$ 8.....
Duration of test:	approximately 9..... minutes
More advice:	keep a driving 10.....



**PART 01**

**Questions 1-10**

Complete the notes below.

Write **ONE WORD AND/OR A NUMBER** for each answer.

**TOTAL HEALTH CLINIC**

**PATIENT DETAILS**

**Personal information**

*Example*

Name Julie Anne .....*Garcia*.....  
 Contact phone **1**.....  
 Date of birth **2**....., 1992  
 Occupation works as a **3**.....  
 Insurance company **4**..... Life Insurance

**Details of the problem**

Type of problem pain in her left **5**.....  
 When it began **6**..... ago  
 Action already taken has taken painkillers and applied ice

**Other information**

Sports played belongs to a **7**..... club  
 goes **8**..... regularly  
 Medical history injured her **9**..... last year  
 no allergies  
 no regular medication apart from **10**.....