



Pupil's Name
School Name

DATE OF TEST		
Day	Month	Year

UNIQUE PUPIL NUMBER									

SCHOOL NUMBER					

DATE OF BIRTH		
Day	Month	Year

Please mark boxes with a thin horizontal line like this .

<b>EXAMPLE</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>
p <input type="checkbox"/>	m <input type="checkbox"/>	l <input type="checkbox"/>	b <input type="checkbox"/>	c <input type="checkbox"/>	p <input type="checkbox"/>	b <input type="checkbox"/>	f <input type="checkbox"/>
o <input type="checkbox"/>	e <input type="checkbox"/>	i <input type="checkbox"/>	i <input type="checkbox"/>	h <input type="checkbox"/>	l <input type="checkbox"/>	r <input type="checkbox"/>	l <input type="checkbox"/>
u <input checked="" type="checkbox"/>	t <input type="checkbox"/>	n <input type="checkbox"/>	a <input type="checkbox"/>	o <input type="checkbox"/>	a <input type="checkbox"/>	a <input type="checkbox"/>	o <input type="checkbox"/>
n <input type="checkbox"/>	a <input type="checkbox"/>	e <input type="checkbox"/>	s <input type="checkbox"/>	m <input type="checkbox"/>	y <input type="checkbox"/>	i <input type="checkbox"/>	w <input type="checkbox"/>
d <input type="checkbox"/>	l <input type="checkbox"/>	r <input type="checkbox"/>	d <input type="checkbox"/>	p <input type="checkbox"/>	r <input type="checkbox"/>	n <input type="checkbox"/>	r <input type="checkbox"/>

<b>EXAMPLE</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>
p <input type="checkbox"/>	m <input type="checkbox"/>	b <input type="checkbox"/>	t <input type="checkbox"/>	t <input type="checkbox"/>	s <input type="checkbox"/>	w <input type="checkbox"/>	b <input type="checkbox"/>
n <input type="checkbox"/>	t <input type="checkbox"/>	k <input type="checkbox"/>	r <input type="checkbox"/>	d <input type="checkbox"/>	r <input type="checkbox"/>	g <input type="checkbox"/>	o <input type="checkbox"/>
f <input type="checkbox"/>	d <input type="checkbox"/>	m <input type="checkbox"/>	m <input type="checkbox"/>	p <input type="checkbox"/>	b <input type="checkbox"/>	p <input type="checkbox"/>	e <input type="checkbox"/>
t <input checked="" type="checkbox"/>	s <input type="checkbox"/>	p <input type="checkbox"/>	f <input type="checkbox"/>	c <input type="checkbox"/>	p <input type="checkbox"/>	l <input type="checkbox"/>	l <input type="checkbox"/>
c <input type="checkbox"/>	n <input type="checkbox"/>	s <input type="checkbox"/>	k <input type="checkbox"/>	e <input type="checkbox"/>	k <input type="checkbox"/>	n <input type="checkbox"/>	d <input type="checkbox"/>

<b>EXAMPLE</b>	<b>15</b>	<b>16</b>	<b>17</b>	<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>
bud <input checked="" type="checkbox"/>	gem <input type="checkbox"/>	tan <input type="checkbox"/>	use <input type="checkbox"/>	swap <input type="checkbox"/>	eel <input type="checkbox"/>	once <input type="checkbox"/>	for <input type="checkbox"/>
beg <input type="checkbox"/>	map <input type="checkbox"/>	tee <input type="checkbox"/>	lip <input type="checkbox"/>	saps <input type="checkbox"/>	ale <input type="checkbox"/>	hens <input type="checkbox"/>	who <input type="checkbox"/>
dug <input type="checkbox"/>	hip <input type="checkbox"/>	ten <input type="checkbox"/>	pea <input type="checkbox"/>	sums <input type="checkbox"/>	eye <input type="checkbox"/>	nets <input type="checkbox"/>	was <input type="checkbox"/>
bed <input type="checkbox"/>	ham <input type="checkbox"/>	tar <input type="checkbox"/>	gap <input type="checkbox"/>	saws <input type="checkbox"/>	awe <input type="checkbox"/>	oils <input type="checkbox"/>	oar <input type="checkbox"/>
wed <input type="checkbox"/>	mop <input type="checkbox"/>	tab <input type="checkbox"/>	lap <input type="checkbox"/>	swim <input type="checkbox"/>	ewe <input type="checkbox"/>	nest <input type="checkbox"/>	wad <input type="checkbox"/>

<b>EXAMPLE</b>	<b>22</b>	<b>23</b>	<b>24</b>	<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>
16 <input type="checkbox"/>	33 <input type="checkbox"/>	21 <input type="checkbox"/>	15 <input type="checkbox"/>	45 <input type="checkbox"/>	32 <input type="checkbox"/>	100 <input type="checkbox"/>	122 <input type="checkbox"/>	1 <input type="checkbox"/>
11 <input type="checkbox"/>	29 <input type="checkbox"/>	20 <input type="checkbox"/>	13 <input type="checkbox"/>	48 <input type="checkbox"/>	31 <input type="checkbox"/>	95 <input type="checkbox"/>	84 <input type="checkbox"/>	9 <input type="checkbox"/>
10 <input checked="" type="checkbox"/>	25 <input type="checkbox"/>	25 <input type="checkbox"/>	12 <input type="checkbox"/>	46 <input type="checkbox"/>	35 <input type="checkbox"/>	93 <input type="checkbox"/>	62 <input type="checkbox"/>	3 <input type="checkbox"/>
9 <input type="checkbox"/>	23 <input type="checkbox"/>	22 <input type="checkbox"/>	14 <input type="checkbox"/>	39 <input type="checkbox"/>	33 <input type="checkbox"/>	96 <input type="checkbox"/>	140 <input type="checkbox"/>	5 <input type="checkbox"/>
12 <input type="checkbox"/>	31 <input type="checkbox"/>	28 <input type="checkbox"/>	11 <input type="checkbox"/>	51 <input type="checkbox"/>	34 <input type="checkbox"/>	99 <input type="checkbox"/>	112 <input type="checkbox"/>	2 <input type="checkbox"/>

<b>EXAMPLE</b>	<b>30</b>	<b>31</b>	<b>32</b>
morning <input type="checkbox"/>	break <input type="checkbox"/>	cheap <input type="checkbox"/>	complex <input type="checkbox"/>
early <input checked="" type="checkbox"/>	ignore <input type="checkbox"/>	price <input type="checkbox"/>	superior <input type="checkbox"/>
wake <input type="checkbox"/>	hit <input type="checkbox"/>	cost <input type="checkbox"/>	modern <input type="checkbox"/>
late <input checked="" type="checkbox"/>	poke <input type="checkbox"/>	amount <input type="checkbox"/>	old <input type="checkbox"/>
shop <input type="checkbox"/>	miss <input type="checkbox"/>	dear <input type="checkbox"/>	new <input type="checkbox"/>
dark <input type="checkbox"/>	aim <input type="checkbox"/>	expense <input type="checkbox"/>	fresh <input type="checkbox"/>

<b>33</b>	<b>34</b>	<b>35</b>	<b>36</b>
lock <input type="checkbox"/>	hobby <input type="checkbox"/>	heavy <input type="checkbox"/>	approximate <input type="checkbox"/>
close <input type="checkbox"/>	usual <input type="checkbox"/>	glow <input type="checkbox"/>	true <input type="checkbox"/>
away <input type="checkbox"/>	rarely <input type="checkbox"/>	stiff <input type="checkbox"/>	close <input type="checkbox"/>
key <input type="checkbox"/>	habit <input type="checkbox"/>	shine <input type="checkbox"/>	broad <input type="checkbox"/>
distant <input type="checkbox"/>	often <input type="checkbox"/>	hard <input type="checkbox"/>	precise <input type="checkbox"/>
shut <input type="checkbox"/>	seldom <input type="checkbox"/>	flexible <input type="checkbox"/>	rough <input type="checkbox"/>

<b>37</b>	
transparent <input type="checkbox"/>	empty <input type="checkbox"/>
clear <input type="checkbox"/>	vague <input type="checkbox"/>
hollow <input type="checkbox"/>	glass <input type="checkbox"/>



Please mark boxes with a thin horizontal line like this .

<b>EXAMPLE</b> The film <input type="checkbox"/> film ended <input checked="" type="checkbox"/> ended happily <input type="checkbox"/> happily after <input type="checkbox"/> after all. <input type="checkbox"/>	<b>38</b> They were <input type="checkbox"/> were not <input type="checkbox"/> not alerted <input type="checkbox"/> alerted at <input type="checkbox"/> at once. <input type="checkbox"/>	<b>39</b> The shampoo <input type="checkbox"/> shampoo left <input type="checkbox"/> left bubbles <input type="checkbox"/> bubbles in <input type="checkbox"/> in the <input type="checkbox"/>	<b>40</b> Visitors wandered <input type="checkbox"/> wandered around <input type="checkbox"/> around the <input type="checkbox"/> the colourful <input type="checkbox"/> colourful gardens. <input type="checkbox"/>	<b>41</b> She tried <input type="checkbox"/> tried to <input type="checkbox"/> to grasp <input type="checkbox"/> grasp another <input type="checkbox"/> another rope. <input type="checkbox"/>	<b>42</b> The rhinoceros <input type="checkbox"/> rhinoceros escaped <input type="checkbox"/> escaped from <input type="checkbox"/> from the <input type="checkbox"/> the cage. <input type="checkbox"/>	<b>43</b> He hid <input type="checkbox"/> hid the <input type="checkbox"/> the banjo <input type="checkbox"/> banjo inside <input type="checkbox"/> inside the <input type="checkbox"/>
<b>44</b> They searched <input type="checkbox"/> searched the <input type="checkbox"/> the patrol <input type="checkbox"/> patrol area <input type="checkbox"/> area systematically. <input type="checkbox"/>						

<b>EXAMPLE</b> GP <input type="checkbox"/> GO <input checked="" type="checkbox"/> HO <input type="checkbox"/> GR <input type="checkbox"/> GQ <input type="checkbox"/>	<b>45</b> ZL <input type="checkbox"/> YL <input type="checkbox"/> YK <input type="checkbox"/> ZK <input type="checkbox"/> YM <input type="checkbox"/>	<b>46</b> NC <input type="checkbox"/> OD <input type="checkbox"/> MC <input type="checkbox"/> ND <input type="checkbox"/> OB <input type="checkbox"/>	<b>47</b> JB <input type="checkbox"/> IB <input type="checkbox"/> HE <input type="checkbox"/> IA <input type="checkbox"/> JA <input type="checkbox"/>	<b>48</b> WV <input type="checkbox"/> UV <input type="checkbox"/> XU <input type="checkbox"/> XT <input type="checkbox"/> UX <input type="checkbox"/>	<b>49</b> ET <input type="checkbox"/> UE <input type="checkbox"/> DT <input type="checkbox"/> DU <input type="checkbox"/> EU <input type="checkbox"/>	<b>50</b> QU <input type="checkbox"/> RU <input type="checkbox"/> RV <input type="checkbox"/> QV <input type="checkbox"/> QW <input type="checkbox"/>	<b>51</b> SC <input type="checkbox"/> RC <input type="checkbox"/> TD <input type="checkbox"/> TC <input type="checkbox"/> SD <input type="checkbox"/>
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<b>EXAMPLE</b> LAD <input type="checkbox"/> LAW <input checked="" type="checkbox"/> HAD <input type="checkbox"/> RAW <input type="checkbox"/> RED <input type="checkbox"/>	<b>52</b> BAG <input type="checkbox"/> GET <input type="checkbox"/> EVE <input type="checkbox"/> SAG <input type="checkbox"/> BAT <input type="checkbox"/>	<b>53</b> DEN <input type="checkbox"/> KID <input type="checkbox"/> PAR <input type="checkbox"/> RAN <input type="checkbox"/> LAD <input type="checkbox"/>	<b>54</b> EGG <input type="checkbox"/> LAB <input type="checkbox"/> ONE <input type="checkbox"/> TUG <input type="checkbox"/> RIP <input type="checkbox"/>	<b>55</b> ROE <input type="checkbox"/> AFT <input type="checkbox"/> APE <input type="checkbox"/> EAR <input type="checkbox"/> OWE <input type="checkbox"/>	<b>56</b> FAT <input type="checkbox"/> MOW <input type="checkbox"/> VAN <input type="checkbox"/> CAP <input type="checkbox"/> RAT <input type="checkbox"/>	<b>57</b> GAP <input type="checkbox"/> NIL <input type="checkbox"/> JOY <input type="checkbox"/> TON <input type="checkbox"/> POT <input type="checkbox"/>	<b>58</b> HUM <input type="checkbox"/> GEM <input type="checkbox"/> ACE <input type="checkbox"/> TEN <input type="checkbox"/> TRY <input type="checkbox"/>	<b>59</b> SET <input type="checkbox"/> HIP <input type="checkbox"/> FOR <input type="checkbox"/> COT <input type="checkbox"/> LET <input type="checkbox"/>
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<b>EXAMPLE</b> small <input checked="" type="checkbox"/> apple <input type="checkbox"/> orange <input type="checkbox"/> red <input type="checkbox"/> colour <input type="checkbox"/> narrow <input checked="" type="checkbox"/>	<b>60</b> eye <input type="checkbox"/> hear <input type="checkbox"/> blink <input type="checkbox"/> tone <input type="checkbox"/> see <input type="checkbox"/> noise <input type="checkbox"/>	<b>61</b> low <input type="checkbox"/> fall <input type="checkbox"/> far <input type="checkbox"/> shallow <input type="checkbox"/> big <input type="checkbox"/> water <input type="checkbox"/>	<b>62</b> driver <input type="checkbox"/> airline <input type="checkbox"/> passengers <input type="checkbox"/> cloud <input type="checkbox"/> road <input type="checkbox"/> pilot <input type="checkbox"/>
<b>63</b> sink <input type="checkbox"/> bottle <input type="checkbox"/> stopper <input type="checkbox"/> float <input type="checkbox"/> block <input type="checkbox"/> screw <input type="checkbox"/>	<b>64</b> insect <input type="checkbox"/> fast <input type="checkbox"/> wings <input type="checkbox"/> person <input type="checkbox"/> feathers <input type="checkbox"/> legs <input type="checkbox"/>	<b>65</b> sew <input type="checkbox"/> pat <input type="checkbox"/> needle <input type="checkbox"/> paint <input type="checkbox"/> cloth <input type="checkbox"/> cat <input type="checkbox"/>	<b>66</b> open <input type="checkbox"/> confined <input type="checkbox"/> spacious <input type="checkbox"/> close <input type="checkbox"/> great <input type="checkbox"/> near <input type="checkbox"/>

<b>67</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>
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<b>EXAMPLE</b> ball <input type="checkbox"/> dirt <input type="checkbox"/> plant <input type="checkbox"/> earth <input checked="" type="checkbox"/> universe <input type="checkbox"/>	<b>68</b> grant <input type="checkbox"/> let <input type="checkbox"/> agree <input type="checkbox"/> use <input type="checkbox"/> loan <input type="checkbox"/>	<b>69</b> tree <input type="checkbox"/> shout <input type="checkbox"/> cut <input type="checkbox"/> bark <input type="checkbox"/> call <input type="checkbox"/>	<b>70</b> please <input type="checkbox"/> copy <input type="checkbox"/> enjoy <input type="checkbox"/> like <input type="checkbox"/> same <input type="checkbox"/>	<b>71</b> flat <input type="checkbox"/> voucher <input type="checkbox"/> counter <input type="checkbox"/> sideboard <input type="checkbox"/> coin <input type="checkbox"/>	<b>72</b> hop <input type="checkbox"/> flow <input type="checkbox"/> move <input type="checkbox"/> source <input type="checkbox"/> spring <input type="checkbox"/>	<b>73</b> book <input type="checkbox"/> path <input type="checkbox"/> walk <input type="checkbox"/> read <input type="checkbox"/> passage <input type="checkbox"/>	<b>74</b> plot <input type="checkbox"/> scheme <input type="checkbox"/> garden <input type="checkbox"/> land <input type="checkbox"/> conceive <input type="checkbox"/>
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<b>75</b> 5836 <input type="checkbox"/> 5368 <input type="checkbox"/> 5872 <input type="checkbox"/> 5462 <input type="checkbox"/> 5426 <input type="checkbox"/>	<b>76</b> 4627 <input type="checkbox"/> 6428 <input type="checkbox"/> 6472 <input type="checkbox"/> 6427 <input type="checkbox"/> 4678 <input type="checkbox"/>	<b>77</b> TUBS <input type="checkbox"/> TUNE <input type="checkbox"/> TUNA <input type="checkbox"/> TANS <input type="checkbox"/> TABS <input type="checkbox"/>	<b>78</b> 3512 <input type="checkbox"/> 5716 <input type="checkbox"/> 8621 <input type="checkbox"/> 3421 <input type="checkbox"/> 5632 <input type="checkbox"/>	<b>79</b> PEAT <input type="checkbox"/> PEAK <input type="checkbox"/> TEAK <input type="checkbox"/> TANK <input type="checkbox"/> PENT <input type="checkbox"/>	<b>80</b> 3751 <input type="checkbox"/> 3761 <input type="checkbox"/> 7351 <input type="checkbox"/> 7361 <input type="checkbox"/> 3851 <input type="checkbox"/>
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