

Pupil's Name

Date of Test

School Name

DATE OF BIRTH		
Day	Month	Year
<input type="checkbox"/>	January	<input type="checkbox"/>
<input type="checkbox"/>	February	<input type="checkbox"/>
<input type="checkbox"/>	March	<input type="checkbox"/>
<input type="checkbox"/>	April	<input type="checkbox"/>
<input type="checkbox"/>	May	<input type="checkbox"/>
<input type="checkbox"/>	June	<input type="checkbox"/>
<input type="checkbox"/>	July	<input type="checkbox"/>
<input type="checkbox"/>	August	<input type="checkbox"/>
<input type="checkbox"/>	September	<input type="checkbox"/>
<input type="checkbox"/>	October	<input type="checkbox"/>
<input type="checkbox"/>	November	<input type="checkbox"/>
<input type="checkbox"/>	December	<input type="checkbox"/>

PUPIL NUMBER					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SCHOOL NUMBER					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please mark boxes with a thin horizontal line like this .

EXAMPLE p <input type="checkbox"/> o <input type="checkbox"/> u <input checked="" type="checkbox"/> n <input type="checkbox"/> d <input type="checkbox"/>	1 m <input type="checkbox"/> e <input type="checkbox"/> t <input type="checkbox"/> a <input type="checkbox"/> l <input type="checkbox"/>	2 l <input type="checkbox"/> i <input type="checkbox"/> n <input type="checkbox"/> e <input type="checkbox"/> r <input type="checkbox"/>	3 b <input type="checkbox"/> i <input type="checkbox"/> a <input type="checkbox"/> s <input type="checkbox"/> d <input type="checkbox"/>	4 c <input type="checkbox"/> h <input type="checkbox"/> o <input type="checkbox"/> m <input type="checkbox"/> p <input type="checkbox"/>	5 p <input type="checkbox"/> l <input type="checkbox"/> a <input type="checkbox"/> y <input type="checkbox"/> r <input type="checkbox"/>	6 b <input type="checkbox"/> r <input type="checkbox"/> a <input type="checkbox"/> i <input type="checkbox"/> n <input type="checkbox"/>	7 f <input type="checkbox"/> l <input type="checkbox"/> o <input type="checkbox"/> w <input type="checkbox"/> r <input type="checkbox"/>
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EXAMPLE p <input type="checkbox"/> n <input type="checkbox"/> f <input type="checkbox"/> t <input checked="" type="checkbox"/> c <input type="checkbox"/>	8 m <input type="checkbox"/> t <input type="checkbox"/> d <input type="checkbox"/> s <input type="checkbox"/> n <input type="checkbox"/>	9 b <input type="checkbox"/> k <input type="checkbox"/> m <input type="checkbox"/> p <input type="checkbox"/> s <input type="checkbox"/>	10 t <input type="checkbox"/> r <input type="checkbox"/> m <input type="checkbox"/> f <input type="checkbox"/> k <input type="checkbox"/>	11 t <input type="checkbox"/> d <input type="checkbox"/> p <input type="checkbox"/> c <input type="checkbox"/> e <input type="checkbox"/>	12 s <input type="checkbox"/> r <input type="checkbox"/> b <input type="checkbox"/> p <input type="checkbox"/> k <input type="checkbox"/>	13 w <input type="checkbox"/> g <input type="checkbox"/> p <input type="checkbox"/> l <input type="checkbox"/> n <input type="checkbox"/>	14 b <input type="checkbox"/> o <input type="checkbox"/> e <input type="checkbox"/> l <input type="checkbox"/> d <input type="checkbox"/>
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EXAMPLE bud <input checked="" type="checkbox"/> beg <input type="checkbox"/> dug <input type="checkbox"/> bed <input type="checkbox"/> wed <input type="checkbox"/>	15 gem <input type="checkbox"/> map <input type="checkbox"/> hip <input type="checkbox"/> ham <input type="checkbox"/> mop <input type="checkbox"/>	16 tan <input type="checkbox"/> tee <input type="checkbox"/> ten <input type="checkbox"/> tar <input type="checkbox"/> tab <input type="checkbox"/>	17 use <input type="checkbox"/> lip <input type="checkbox"/> pea <input type="checkbox"/> gap <input type="checkbox"/> lap <input type="checkbox"/>	18 swap <input type="checkbox"/> saps <input type="checkbox"/> sums <input type="checkbox"/> saws <input type="checkbox"/> swim <input type="checkbox"/>	19 eel <input type="checkbox"/> ale <input type="checkbox"/> eye <input type="checkbox"/> awe <input type="checkbox"/> ewe <input type="checkbox"/>	20 once <input type="checkbox"/> hens <input type="checkbox"/> nets <input type="checkbox"/> oils <input type="checkbox"/> nest <input type="checkbox"/>	21 for <input type="checkbox"/> who <input type="checkbox"/> was <input type="checkbox"/> oar <input type="checkbox"/> wad <input type="checkbox"/>
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EXAMPLE 16 <input type="checkbox"/> 11 <input type="checkbox"/> 10 <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 12 <input type="checkbox"/>	22 33 <input type="checkbox"/> 29 <input type="checkbox"/> 25 <input type="checkbox"/> 23 <input type="checkbox"/> 31 <input type="checkbox"/>	23 21 <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 22 <input type="checkbox"/> 28 <input type="checkbox"/>	24 15 <input type="checkbox"/> 13 <input type="checkbox"/> 12 <input type="checkbox"/> 14 <input type="checkbox"/> 11 <input type="checkbox"/>	25 45 <input type="checkbox"/> 48 <input type="checkbox"/> 46 <input type="checkbox"/> 39 <input type="checkbox"/> 51 <input type="checkbox"/>	26 32 <input type="checkbox"/> 31 <input type="checkbox"/> 35 <input type="checkbox"/> 33 <input type="checkbox"/> 34 <input type="checkbox"/>	27 100 <input type="checkbox"/> 95 <input type="checkbox"/> 93 <input type="checkbox"/> 96 <input type="checkbox"/> 99 <input type="checkbox"/>	28 122 <input type="checkbox"/> 84 <input type="checkbox"/> 62 <input type="checkbox"/> 140 <input type="checkbox"/> 112 <input type="checkbox"/>	29 1 <input type="checkbox"/> 9 <input type="checkbox"/> 3 <input type="checkbox"/> 5 <input type="checkbox"/> 2 <input type="checkbox"/>
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EXAMPLE morning <input type="checkbox"/> early <input checked="" type="checkbox"/> wake <input type="checkbox"/>	late <input checked="" type="checkbox"/> shop <input type="checkbox"/> dark <input type="checkbox"/>	30 break <input type="checkbox"/> ignore <input type="checkbox"/> hit <input type="checkbox"/>	poke <input type="checkbox"/> miss <input type="checkbox"/> aim <input type="checkbox"/>	31 cheap <input type="checkbox"/> price <input type="checkbox"/> cost <input type="checkbox"/>	amount <input type="checkbox"/> dear <input type="checkbox"/> expense <input type="checkbox"/>	32 complex <input type="checkbox"/> superior <input type="checkbox"/> modern <input type="checkbox"/>	old <input type="checkbox"/> new <input type="checkbox"/> fresh <input type="checkbox"/>
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33 lock <input type="checkbox"/> close <input type="checkbox"/> away <input type="checkbox"/>	key <input type="checkbox"/> distant <input type="checkbox"/> shut <input type="checkbox"/>	34 hobby <input type="checkbox"/> usual <input type="checkbox"/> rarely <input type="checkbox"/>	habit <input type="checkbox"/> often <input type="checkbox"/> seldom <input type="checkbox"/>	35 heavy <input type="checkbox"/> glow <input type="checkbox"/> stiff <input type="checkbox"/>	shine <input type="checkbox"/> hard <input type="checkbox"/> flexible <input type="checkbox"/>	36 approximate <input type="checkbox"/> true <input type="checkbox"/> close <input type="checkbox"/>	broad <input type="checkbox"/> precise <input type="checkbox"/> rough <input type="checkbox"/>
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37 transparent <input type="checkbox"/> clear <input type="checkbox"/> hollow <input type="checkbox"/>	empty <input type="checkbox"/> vague <input type="checkbox"/> glass <input type="checkbox"/>
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EXAMPLE The film ended happily after all. <input type="checkbox"/>	38 They were not alerted at once. <input type="checkbox"/>	39 The shampoo left bubbles in the <input type="checkbox"/>	40 Visitors wandered around the colourful gardens. <input type="checkbox"/>	41 She tried to grasp another rope. <input type="checkbox"/>	42 The rhinoceros escaped from the cage. <input type="checkbox"/>
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43 He hid the banjo inside the <input type="checkbox"/>	44 They searched the patrol area systematically. <input type="checkbox"/>
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EXAMPLE GP <input type="checkbox"/> GO <input checked="" type="checkbox"/> HO <input type="checkbox"/> GR <input type="checkbox"/> GQ <input type="checkbox"/>	45 ZL <input type="checkbox"/> YL <input type="checkbox"/> YK <input type="checkbox"/> ZK <input type="checkbox"/> YM <input type="checkbox"/>	46 NC <input type="checkbox"/> OD <input type="checkbox"/> MC <input type="checkbox"/> ND <input type="checkbox"/> OB <input type="checkbox"/>	47 JB <input type="checkbox"/> IB <input type="checkbox"/> HE <input type="checkbox"/> IA <input type="checkbox"/> JA <input type="checkbox"/>	48 WV <input type="checkbox"/> UV <input type="checkbox"/> XU <input type="checkbox"/> XT <input type="checkbox"/> UX <input type="checkbox"/>	49 ET <input type="checkbox"/> UE <input type="checkbox"/> DT <input type="checkbox"/> DU <input type="checkbox"/> EU <input type="checkbox"/>	50 QU <input type="checkbox"/> RU <input type="checkbox"/> RV <input type="checkbox"/> QV <input type="checkbox"/> QW <input type="checkbox"/>	51 SC <input type="checkbox"/> RC <input type="checkbox"/> TD <input type="checkbox"/> TC <input type="checkbox"/> SD <input type="checkbox"/>
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EXAMPLE LAD <input type="checkbox"/> LAW <input checked="" type="checkbox"/> HAD <input type="checkbox"/> RAW <input type="checkbox"/> RED <input type="checkbox"/>	52 BAG <input type="checkbox"/> GET <input type="checkbox"/> EVE <input type="checkbox"/> SAG <input type="checkbox"/> BAT <input type="checkbox"/>	53 DEN <input type="checkbox"/> KID <input type="checkbox"/> PAR <input type="checkbox"/> RAN <input type="checkbox"/> LAD <input type="checkbox"/>	54 EGG <input type="checkbox"/> LAB <input type="checkbox"/> ONE <input type="checkbox"/> TUG <input type="checkbox"/> RIP <input type="checkbox"/>	55 ROE <input type="checkbox"/> AFT <input type="checkbox"/> APE <input type="checkbox"/> EAR <input type="checkbox"/> OWE <input type="checkbox"/>	56 FAT <input type="checkbox"/> MOW <input type="checkbox"/> VAN <input type="checkbox"/> CAP <input type="checkbox"/> RAT <input type="checkbox"/>	57 GAP <input type="checkbox"/> NIL <input type="checkbox"/> JOY <input type="checkbox"/> TON <input type="checkbox"/> POT <input type="checkbox"/>	58 HUM <input type="checkbox"/> GEM <input type="checkbox"/> ACE <input type="checkbox"/> TEN <input type="checkbox"/> TRY <input type="checkbox"/>	59 SET <input type="checkbox"/> HIP <input type="checkbox"/> FOR <input type="checkbox"/> COT <input type="checkbox"/> LET <input type="checkbox"/>
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EXAMPLE 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"/>	60 eye <input type="checkbox"/> hear <input type="checkbox"/> blink <input type="checkbox"/> tone <input type="checkbox"/> see <input type="checkbox"/> noise <input type="checkbox"/>	61 low <input type="checkbox"/> fall <input type="checkbox"/> far <input type="checkbox"/> shallow <input type="checkbox"/> big <input type="checkbox"/> water <input type="checkbox"/>	62 driver <input type="checkbox"/> airline <input type="checkbox"/> passengers <input type="checkbox"/> road <input type="checkbox"/> cloud <input type="checkbox"/> pilot <input type="checkbox"/>
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63 sink <input type="checkbox"/> bottle <input type="checkbox"/> stopper <input type="checkbox"/> float <input type="checkbox"/> block <input type="checkbox"/> screw <input type="checkbox"/>	64 insect <input type="checkbox"/> fast <input type="checkbox"/> wings <input type="checkbox"/> person <input type="checkbox"/> feathers <input type="checkbox"/> legs <input type="checkbox"/>	65 sew <input type="checkbox"/> pat <input type="checkbox"/> needle <input type="checkbox"/> paint <input type="checkbox"/> cloth <input type="checkbox"/> cat <input type="checkbox"/>	66 open <input type="checkbox"/> confined <input type="checkbox"/> spacious <input type="checkbox"/> close <input type="checkbox"/> great <input type="checkbox"/> near <input type="checkbox"/>	67 A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>
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EXAMPLE ball <input type="checkbox"/> dirt <input type="checkbox"/> plant <input type="checkbox"/> earth <input checked="" type="checkbox"/> universe <input type="checkbox"/>	68 grant <input type="checkbox"/> let <input type="checkbox"/> agree <input type="checkbox"/> use <input type="checkbox"/> loan <input type="checkbox"/>	69 tree <input type="checkbox"/> shout <input type="checkbox"/> cut <input type="checkbox"/> bark <input type="checkbox"/> call <input type="checkbox"/>	70 please <input type="checkbox"/> copy <input type="checkbox"/> enjoy <input type="checkbox"/> like <input type="checkbox"/> same <input type="checkbox"/>	71 flat <input type="checkbox"/> voucher <input type="checkbox"/> counter <input type="checkbox"/> sideboard <input type="checkbox"/> coin <input type="checkbox"/>	72 hop <input type="checkbox"/> flow <input type="checkbox"/> move <input type="checkbox"/> source <input type="checkbox"/> spring <input type="checkbox"/>	73 book <input type="checkbox"/> path <input type="checkbox"/> walk <input type="checkbox"/> read <input type="checkbox"/> passage <input type="checkbox"/>	74 plot <input type="checkbox"/> scheme <input type="checkbox"/> garden <input type="checkbox"/> land <input type="checkbox"/> conceive <input type="checkbox"/>
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75 5836 <input type="checkbox"/> 5368 <input type="checkbox"/> 5872 <input type="checkbox"/> 5462 <input type="checkbox"/> 5426 <input type="checkbox"/>	76 4627 <input type="checkbox"/> 6428 <input type="checkbox"/> 6472 <input type="checkbox"/> 6427 <input type="checkbox"/> 4678 <input type="checkbox"/>	77 TUBS <input type="checkbox"/> TUNE <input type="checkbox"/> TUNA <input type="checkbox"/> TANS <input type="checkbox"/> TABS <input type="checkbox"/>	78 3512 <input type="checkbox"/> 5716 <input type="checkbox"/> 8621 <input type="checkbox"/> 3421 <input type="checkbox"/> 5632 <input type="checkbox"/>	79 PEAT <input type="checkbox"/> PEAK <input type="checkbox"/> TEAK <input type="checkbox"/> TANK <input type="checkbox"/> PENT <input type="checkbox"/>	80 3751 <input type="checkbox"/> 3761 <input type="checkbox"/> 7351 <input type="checkbox"/> 7361 <input type="checkbox"/> 3851 <input type="checkbox"/>
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