

ESOL Skills for Life

Entry 2 – Writing

Sample Paper 5



Your full name:
(BLOCK CAPITALS)

Candidate number:

Centre number:

Exam date:

Time allowed: 50 minutes

- ▶ Write your name, candidate number, centre number and exam date on the front of this exam paper.
- ▶ You must not open this exam paper until instructed to do so.
- ▶ This exam paper has **three** tasks. Complete **all** tasks.
- ▶ You may highlight parts of the exam paper with a highlighter pen.
- ▶ Write your answers on the exam paper.
- ▶ Use only blue or black pen for your answers.
- ▶ Do all rough work on the exam paper. Cross through any work you do not want marked.
- ▶ You must not use pencil, erasable pen or correction fluid.
- ▶ You must not use a dictionary in this exam.
- ▶ You must not take this exam paper out of the exam room.

For examiner use only

Examiner initials	Examiner number

Task 1

Complete the form below.

Employee Record Form	
SECTION 1 – CONTACT DETAILS	
Title: Mr Mrs Ms Miss (please delete as applicable)	
First name	
Surname	
Address	
Postcode	
Email address	
Phone number	
SECTION 2 – PERSONAL DETAILS	
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y
Gender	MALE / FEMALE (please delete as applicable)
Nationality	
What languages do you speak?	
SECTION 3 – SIGNATURE	
Signature	

