

# ANSWER SHEET

## TEST PAPER 10 ANSWERS:

*"Practice makes progress"*

All questions are one mark unless stated otherwise below.

Please mark boxes with a thin horizontal line like this .

### ENGLISH MAIN TEST

<b>1</b>	A <input checked="" type="checkbox"/>	<b>2</b>	A <input type="checkbox"/>	<b>3</b>	A <input type="checkbox"/>	<b>4</b>	A <input checked="" type="checkbox"/>	<b>5</b>	A <input type="checkbox"/>
B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input checked="" type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input checked="" type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>
N <input type="checkbox"/>	N <input checked="" type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>

<b>6</b>	A <input type="checkbox"/>	<b>7</b>	A <input type="checkbox"/>	<b>8</b>	A <input checked="" type="checkbox"/>	<b>9</b>	A <input type="checkbox"/>	<b>10</b>	A <input type="checkbox"/>
B <input checked="" type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input checked="" type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input checked="" type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>
E <input type="checkbox"/>	E <input checked="" type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>

<b>11</b>	A <input type="checkbox"/>	<b>12</b>	A <input checked="" type="checkbox"/>	<b>13</b>	A <input type="checkbox"/>	<b>14</b>	A <input type="checkbox"/>	<b>15</b>	A <input type="checkbox"/>
B <input type="checkbox"/>	B <input type="checkbox"/>	B <input checked="" type="checkbox"/>	B <input checked="" type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>
C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input checked="" type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>
D <input checked="" type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>
N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>	N <input type="checkbox"/>

### ENGLISH COMPREHENSION

<b>16</b>	A <input type="checkbox"/>	<b>17</b>	A <input checked="" type="checkbox"/>	<b>18</b>	A <input type="checkbox"/>	<b>19</b>	A <input type="checkbox"/>	<b>20</b>	A <input type="checkbox"/>	<b>21</b>	A <input checked="" type="checkbox"/>	<b>22</b>	A <input type="checkbox"/>
B <input type="checkbox"/>	B <input type="checkbox"/>	B <input checked="" type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input checked="" type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	B <input type="checkbox"/>	
C <input checked="" type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	C <input type="checkbox"/>	
D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	D <input type="checkbox"/>	
E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input checked="" type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input type="checkbox"/>	E <input checked="" type="checkbox"/>	E <input type="checkbox"/>	

Please mark boxes with a thin horizontal line like this .

## ENGLISH COMPREHENSION continued

23 Wading my way back to consciousness.

24 She is enjoying the view/taking everything in.

25 Uninhabited.

26 Churning, moody and greyer.

27 We know Izzy is a young child because in lines 20-21 Mum unclips Izzy from her car seat.

They could also mention that the narrator says, 'Mum wriggles out with my baby sister attached to her hip.'

28 They are now feeling excited about what it to come as it is finally happening / Her excitement grows as she watches her mum become excited.

Narrator is called 'Em' but it doesn't say. Accept if they say he or she.

## MATHS - MAIN TEST

29 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input checked="" type="checkbox"/>	30 A - <input type="checkbox"/> B - <input checked="" type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	31 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input checked="" type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	32 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input checked="" type="checkbox"/>	33 A - <input checked="" type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	34 A - <input type="checkbox"/> B - <input checked="" type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	35 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input checked="" type="checkbox"/> E - <input type="checkbox"/>	
36 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input checked="" type="checkbox"/>	37 A - <input checked="" type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	38 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input checked="" type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	39 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input checked="" type="checkbox"/> E - <input type="checkbox"/>	40 A - <input type="checkbox"/> B - <input checked="" type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	41 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input checked="" type="checkbox"/>	42 A - <input checked="" type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	43 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input checked="" type="checkbox"/> E - <input type="checkbox"/>
44 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input checked="" type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	45 A - <input type="checkbox"/> B - <input checked="" type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	46 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input checked="" type="checkbox"/>	47 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input checked="" type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	48 A - <input checked="" type="checkbox"/> B - <input type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	49 A - <input type="checkbox"/> B - <input checked="" type="checkbox"/> C - <input type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	50 A - <input type="checkbox"/> B - <input type="checkbox"/> C - <input checked="" type="checkbox"/> D - <input type="checkbox"/> E - <input type="checkbox"/>	

51 135°

52 95m

53 1120ml

54 9 lessons

55 42m<sup>2</sup>

56 13.48kg

