

AS COMPONENT 1 2017

Component 1 - French/German/Spanish: Oral Working Mark Sheet

Centre no.	Centre name:
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Candidate no.	Candidate name:						
Task 1	Card A - 1 / 2 / 3 / 4 / 5 / 6 (circle the correct number)						
	0	1	2	3	4	5	Total
AO1							
AO2							
	0	1-2	3-4	5-6	7-8	9-10	
AO3							
AO4							
Total: task 1 (ex.30)							

Task 2	Card B - 1 / 2 / 3 / 4 / 5 / 6 (circle the correct number)						
	0	1	2	3	4	5	Total
AO1							
AO2							
	0	1-2	3-4	5-6	7-8	9-10	
AO3							
AO4							
Total: task 2 (ex.30)							
Grand Total: task 1 + task 2 (ex.60)							

Comments:

Examiner name: _____

Examiner no: _____

Folder:

Date/Time: