

Certificate in ESOL Skills for Life



Entry 1—Writing

March 2005

YOUR FULL NAME:
(BLOCK CAPITALS)

CENTRE: DATE:

CANDIDATE REGISTRATION NUMBER:

TIME ALLOWED: 20 MINUTES

PLEASE ANSWER **BOTH** QUESTIONS. **WRITE YOUR ANSWERS IN PEN NOT PENCIL.**

EXAMINER'S USE ONLY

Task one			
Writing composition	6	5 4	3 2 1 0
Grammar and punctuation	6	5 4	3 2 1 0
Spelling and handwriting	3	2	1 0
Task two			
Writing composition	6	5 4	3 2 1 0
Grammar and punctuation	6	5 4	3 2 1 0
Spelling and handwriting	3	2	1 0



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This examination paper contains two questions. Answer both questions.

Task one

You want to change your dentist.


Please complete the form below. (About 30 words)

	MILL STREET DENTAL PRACTICE	
Name:		
Address:		
Telephone number:		
Date of Birth:		
Age on 31 December 2005:		
Nationality:		
Male/Female	(Please circle)	
Signature:		

Task two

Write a postcard to a friend who is learning English in another town. Tell your friend about your studies. Write about your classes and about the exams you are doing. (About 30 words)

(Please write in the space below)

<p>Dear...</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>	<div style="text-align: right;">  </div> <p style="text-align: center;"> ^^^^^^^^^^^^^^^^^ ^^^^^^^^^^^^^^^^^ ^^^^^^^^^^^^^^^^^ ^^^^^^^^^^^^^^^^^ ^^^^^^^^^^^^^^^^^ </p>
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