

Certificate in ESOL Skills for Life

Level 1 – Reading

Answer sheet

Your full name:
(BLOCK CAPITALS)

Centre: Date:

Candidate registration number:

Time allowed: 60 minutes

Please answer **all** questions. Write your answers in pen, **not** pencil. You may **not** use dictionaries.
You may **not** use correction fluid.

Write the letter of the best answer next to each question. If you make a mistake, cross through the letter and write your final answer next to it.

Task 1

Question	Answer
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	

Task 3

Question	Answer
17.	
18.	
19.	
20.	
21.	
22.	
23.	
24.	

Task 2

Question	Answer
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16.	

Task 4

Question	Answer
25.	
26.	
27.	
28.	
29.	
30.	