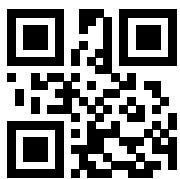


FAMILIARISATION ANSWER SHEET - NON-VERBAL REASONING 2



Pupil's Name _____

School Name _____

DATE OF TEST

Day	Month	Year

UNIQUE PUPIL NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SCHOOL NUMBER

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

DATE OF BIRTH

Day	Month	Year

Please mark boxes with a thin horizontal line like this .

SECTION 1

EXAMPLE

A	
B	
C	<u> </u>
D	
E	

1	A	
2	A	
3	A	
4	A	
5	A	
6	A	
7	A	

P1

A	
B	
C	
D	
E	

P2

A	
B	
C	
D	
E	

8	A	
9	A	
10	A	
11	A	
12	A	
13	A	
14	A	

15	A	
16	A	
17	A	
18	A	
19	A	
20	A	

SECTION 2

EXAMPLE

A	
B	<u> </u>
C	
D	
E	

21	A	
22	A	
23	A	
24	A	
25	A	
26	A	
27	A	

P1

A	
B	
C	
D	
E	

P2

A	
B	
C	
D	
E	

28	A	
29	A	
30	A	
31	A	
32	A	
33	A	
34	A	

35	A	
36	A	
37	A	
38	A	
39	A	
40	A	



FAM NVR2 PLEASE TURN OVER

Please mark boxes with a thin horizontal line like this .

SECTION 3

EXAMPLE
A
B
C
D
E

41	A	B	C	D	E
42	A	B	C	D	E
43	A	B	C	D	E
44	A	B	C	D	E
45	A	B	C	D	E
46	A	B	C	D	E
47	A	B	C	D	E
P1	A	B	C	D	E
P2	A	B	C	D	E
48	A	B	C	D	E
49	A	B	C	D	E
50	A	B	C	D	E
51	A	B	C	D	E
52	A	B	C	D	E
53	A	B	C	D	E
54	A	B	C	D	E
55	A	B	C	D	E
56	A	B	C	D	E
57	A	B	C	D	E
58	A	B	C	D	E
59	A	B	C	D	E
60	A	B	C	D	E

SECTION 4

EXAMPLE
A
B
C
D
E

61	A	B	C	D	E
62	A	B	C	D	E
63	A	B	C	D	E
64	A	B	C	D	E
65	A	B	C	D	E
66	A	B	C	D	E
67	A	B	C	D	E
P1	A	B	C	D	E
P2	A	B	C	D	E
68	A	B	C	D	E
69	A	B	C	D	E
70	A	B	C	D	E
71	A	B	C	D	E
72	A	B	C	D	E
73	A	B	C	D	E
74	A	B	C	D	E
75	A	B	C	D	E
76	A	B	C	D	E
77	A	B	C	D	E
78	A	B	C	D	E
79	A	B	C	D	E
80	A	B	C	D	E

