

SEATING PLAN: 012

A



Mark sheet no. H-05864161	Serial no. 1	Examination date. June 2025	Province. 	Centre. 499995418
Attendance type Full time candidates		Language : English		
Instructional offering 05140344 COMMUNICATION N4				
Paper. EXTERNAL EXAMINATION	Paper no. 2	Date. 20250619	Time 9.00	Duration 2.00
		Max Marks. 100		

EXAMINATION NUMBERS MAY NOT BE INSERTED OR ADDED. No alterations / correction fluid is allowed

* INSTRUCTION Indicate if candidate is present or absent by using $\sqrt{}$ = present or $\emptyset$ = absent
999 must be inserted in the percentage column for candidates absent

	Examination No.	$\sqrt{}/a$	% 100	EAQ	MOD
1	0005220367089	C1			
2	0007280645081	C2			
3	0201210402081	C3			
4	0202060288083	C4			
5	0207130134084				
6	0210095263088				
7	0211190410087	C5			
8	0303046034086	C6			
9	0311235125086	C7			
10	0402231021088	C8			
11	0405195476081	C9			
12	0407145657083	C10			
13	0407145658081	C11			
14	0408300759086	C12			
15	0409231182083	D1			
16	0501060111082	D2			
17	0503051505082	D3			
18	0503195188084	D4			
19	0505205317082	D5			
20	0506260340084	D6			
21	0507221146081	D7			
22	0602200276080	D8			
23	0608065322083	D9			
24	8512120685082	D10			
25	8804121271081	D11			

	Examination No.	$\sqrt{}/a$	% 100	EAQ	MOD
26	9312230164089	D12			
27	9409041008081	E1			
28	9505085900081	E2			
29	9803020502082	E3			
30	9905090117087	E4			
31	*****	**	** ** *	** ** *	** ** *
32	*****	**	** ** *	** ** *	** ** *
33	*****	**	** ** *	** ** *	** ** *
34	*****	**	** ** *	** ** *	** ** *
35	*****	**	** ** *	** ** *	** ** *
36	*****	**	** ** *	** ** *	** ** *
37	*****	**	** ** *	** ** *	** ** *
38	*****	**	** ** *	** ** *	** ** *
39	*****	**	** ** *	** ** *	** ** *
40	*****	**	** ** *	** ** *	** ** *
41	*****	**	** ** *	** ** *	** ** *
42	*****	**	** ** *	** ** *	** ** *
43	*****	**	** ** *	** ** *	** ** *
44	*****	**	** ** *	** ** *	** ** *
45	*****	**	** ** *	** ** *	** ** *
46	*****	**	** ** *	** ** *	** ** *
47	*****	**	** ** *	** ** *	** ** *
48	*****	**	** ** *	** ** *	** ** *
49	*****	**	** ** *	** ** *	** ** *
50	*****	**	** ** *	** ** *	** ** *

INVIGILATOR : _____ DATE : _____
PRINT NAME

CHIEF MARKER : _____ DATE : _____
PRINT NAME

MARKER : _____ DATE : _____
PRINT NAME

EA (QUALITY ASSURER) _____ DATE : _____
PRINT NAME