

SEATING PLAN: 008

A

Mark sheet no. H-05864174	Serial no. 1	Examination date. June 2025	Province. 	Centre. 499995418
Attendance type Full time candidates		Language : English		
Instructional offering 05140406 COMMUNICATION N6				
Paper. EXTERNAL EXAMINATION	Paper no. 1	Date. 20250529	Time 9.00	Duration 3.00
				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 √ = present or a = absent.
899 must be inserted in the percentage column for candidates absent

		Examination No.	√/a	% 100	EAQ	MOD
A1	1	0001150453080				
A2	2	0006140337087				
A3	3	0101210197089				
A4	4	0102096077080				
A5	5	0103285758084				
A6	6	0107210640085				
A7	7	0108040135080				
B1	8	0203225383082				
B2	9	0205310945089				
B3	10	0208190975085				
B4	11	0309290158083				
B5	12	0401115513087				
B6	13	0410010643089				
B7	14	0503091371081				
C1	15	8907260967086				
C2	16	9104300804086				
C3	17	9202181024087				
C4	18	9408290881081				
C5	19	9411160643086				
C6	20	9504010920082				
C7	21	9506190795085				
D1	22	9506211118085				
D2	23	9509210824083				
D3	24	9605025512085				
D4	25	9608250896082				

		Examination No.	√/a	% 100	EAQ	MOD
D5	26	9701220428084				
D6	27	9707220746086				
D7	28	9710301092081				
E1	29	9801075575086				
E2	30	9803080364084				
E3	31	9810030510088				
E4	32	9810161187086				
E5	33	9810270666087				
E6	34	9907151079081				
	35	*****	**	** ** *	** ** *	**
	36	*****	**	** ** *	** ** *	**
	37	*****	**	** ** *	** ** *	**
	38	*****	**	** ** *	** ** *	**
	39	*****	**	** ** *	** ** *	**
	40	*****	**	** ** *	** ** *	**
	41	*****	**	** ** *	** ** *	**
	42	*****	**	** ** *	** ** *	**
	43	*****	**	** ** *	** ** *	**
	44	*****	**	** ** *	** ** *	**
	45	*****	**	** ** *	** ** *	**
	46	*****	**	** ** *	** ** *	**
	47	*****	**	** ** *	** ** *	**
	48	*****	**	** ** *	** ** *	**
	49	*****	**	** ** *	** ** *	**
	50	*****	**	** ** *	** ** *	**

INVIGILATOR : _____ DATE : _____
PRINT NAMECHIEF MARKER : _____ DATE : _____
PRINT NAMEMARKER : _____ DATE : _____
PRINT NAMEEA (QUALITY ASSURER) _____ DATE : _____
PRINT NAME