

# ESOL Skills for Life

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## Entry 1 – Writing

### Sample paper 4

Your full name:.....  
(BLOCK CAPITALS)

Candidate number:.....

Centre number:.....

Exam date:.....

Time allowed: 30 minutes

- ▶ Please complete **all three** tasks.
- ▶ Write your answers in pen, **not** pencil.
- ▶ You may **not** use dictionaries.
- ▶ You may **not** use correction fluid.

*For examiner use only*

Examiner initials	Examiner number

**Task 1**

Complete the form below.

<b>Sunshine Stores Limited</b>	
<b>Please complete this form</b>	
First name	
Surname	
Address	
Postcode	
Telephone	
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> D D M M Y Y Y Y
Nationality	
Signature	



