

IELTS Listening Answer Sheet



Candidate Name []

Candidate No. [][][][][][] Centre No. [][][][][][]

Test Date Day [][] Month [][] Year [][][][]

Listening Listening Listening Listening Listening Listening Listening

1 [] 2 [] 3 [] 4 [] 5 [] 6 [] 7 [] 8 [] 9 [] 10 [] 11 [] 12 [] 13 [] 14 [] 15 [] 16 [] 17 [] 18 [] 19 [] 20 []

Marker use only 1 [] [] 2 [] [] 3 [] [] 4 [] [] 5 [] [] 6 [] [] 7 [] [] 8 [] [] 9 [] [] 10 [] [] 11 [] [] 12 [] [] 13 [] [] 14 [] [] 15 [] [] 16 [] [] 17 [] [] 18 [] [] 19 [] [] 20 [] []

21 [] 22 [] 23 [] 24 [] 25 [] 26 [] 27 [] 28 [] 29 [] 30 [] 31 [] 32 [] 33 [] 34 [] 35 [] 36 [] 37 [] 38 [] 39 [] 40 []

Marker use only 21 [] [] 22 [] [] 23 [] [] 24 [] [] 25 [] [] 26 [] [] 27 [] [] 28 [] [] 29 [] [] 30 [] [] 31 [] [] 32 [] [] 33 [] [] 34 [] [] 35 [] [] 36 [] [] 37 [] [] 38 [] [] 39 [] [] 40 [] []

Marker 2 Signature: []

Marker 1 Signature: []

Listening Total: [][]

