数学検定　Answer Sheet　2nd Kyu-2 （Sheet No. 1）

Selective

Problem No.

1 ○
2 ○
3 ○
4 ○
5 ○

Choose the problem number

※Write the steps leading to your answer if there are no specific instructions for the problem.

Please fill in the box.(the bold part is mandatory)

Name	Examinee Number
	—

Date of Birth （year）　　　（month）　　　（day）

Gender (Check the appropriate box)　Male ☐　Female ☐　Age

Address

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Selective

Problem No.

1 ◯
2 ◯
3 ◯
4 ◯
5 ◯

Choose the problem number

※Write the steps leading to your answer if there are no specific instructions for the problem.

Selective

Problem No.

1 ◯
2 ◯
3 ◯
4 ◯
5 ◯

Choose the problem number

※Write the steps leading to your answer if there are no specific instructions for the problem.

Problem No. 6 Required	※Write the steps leading to your answer if there are no specific instructions for the problem.
Problem No. 7 Required	※Write the steps leading to your answer if there are no specific instructions for the problem.

Test Time
Short ☐　　Appropriate ☐　　Long ☐
Difficult ☐　　Appropriate ☐　　Easy ☐

● If you have time, please answer the following questionnaire. Check the appropriate box.

Which problems did you find interesting? Check the two problems you found most interesting.
1 ☐　　2 ☐　　3 ☐　　4 ☐　　5 ☐　　6 ☐　　7 ☐

Test Time	Level
Short ☐　　Appropriate ☐　　Long ☐	Difficult ☐　　Appropriate ☐　　Easy ☐

Was the supervisor in the class during the test?	（ Yes ☐　　No ☐ ）