

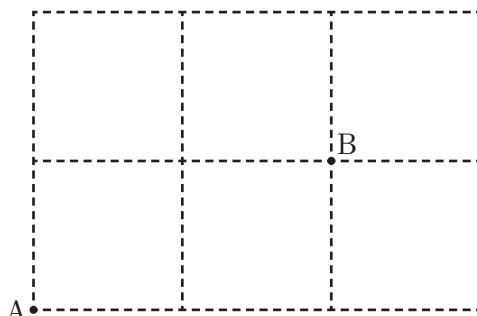
1	(1)	games
	(2)	games
2	(3)	:
	(4)	
3	(5)	Vertex
	(6)	
4	(7)	
	(8)	
5	(9)	
	(10)	

- Use an eraser when correcting your answers.
- Write your answers clearly on the answer sheet.

Please fill in the box below.

Put your sticker for Section 2 with the bar code here.

Name		Examinee Number	
Gender (Check the appropriate box)		Age	
Male <input type="checkbox"/>	Female <input type="checkbox"/>		
Date of Birth (year)	(month)	(day)	
Address			
			20

5	(11)	
		(Answer) _____
6	(12)	$y =$
	(13)	$y =$
7	(14)	
	(15)	
	(16)	
8	(17)	Ocean Difference
	(18)	times
9	(19)	
	(20)	blocks

● 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	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>	6	<input type="checkbox"/>	7	<input type="checkbox"/>	8	<input type="checkbox"/>	9	<input type="checkbox"/>
Test Time			Level														
Short		<input type="checkbox"/>	Appropriate		<input type="checkbox"/>	Long		<input type="checkbox"/>	Difficult		<input type="checkbox"/>	Appropriate		<input type="checkbox"/>	Easy		<input type="checkbox"/>
Was the supervisor in the class during the test?														(Yes <input type="checkbox"/> No <input type="checkbox"/>)			