

<b>1</b>	(1)	
	(2)	
	(3)	
	(4)	
	(5)	
	(6)	
	(7)	
	(8)	
	(9)	
	(10)	

<b>1</b>	(11)	
	(12)	
<b>2</b>	(13)	
	(14)	
	(15)	(cm <sup>3</sup> )
<b>3</b>	(16)	
	(17)	Children             Left over
<b>4</b>	(18)	
	(19)	
<b>5</b>	(20)	

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

Please fill in the box below.

Put your sticker  
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			
		/ 30	

7<sup>th</sup> Kyu

5	(21)	Go (      ) cm along the length, (      ) cm along the width and (      ) cm along the height
6	(22)	
	(23)	
7	(24)	%
	(25)	(Answer) _____ times
	(26)	
8	(27)	
	(28)	
9	(29)	A _____ B
	(30)	

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

Test Time Short <input type="checkbox"/> Appropriate <input type="checkbox"/> Long <input type="checkbox"/>	Level Difficult <input type="checkbox"/> Appropriate <input type="checkbox"/> Easy <input type="checkbox"/>
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"/>	
You heard the supervisor declare "The envelope containing the test problems was opened today." ( Yes <input type="checkbox"/> No <input type="checkbox"/> )	
Was the supervisor in the class during the test? ( Yes <input type="checkbox"/> No <input type="checkbox"/> )	