

# GL West Midlands & Warwickshire

## Mock 1 Answer Sheets



DATE OF TEST					
Day		Month		Year	

DATE OF BIRTH					
Day		Month		Year	

Candidate's Name:

School Name:



# GL West Midlands & Warwickshire Mock 1 Paper A – English

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## English Practice Questions

A	Example
	A <input type="checkbox"/>
	B <input type="checkbox"/>
	C <input type="checkbox"/>
	D <input checked="" type="checkbox"/>
	E <input type="checkbox"/>

1	Practice
	A <input type="checkbox"/>
	B <input type="checkbox"/>
	C <input type="checkbox"/>
	D <input type="checkbox"/>
	E <input type="checkbox"/>

2	Practice
	A <input type="checkbox"/>
	B <input type="checkbox"/>
	C <input type="checkbox"/>
	D <input type="checkbox"/>
	E <input type="checkbox"/>

## English Test Questions

1
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

2
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

3
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

4
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

5
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

6
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

7
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

8
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

9
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

10
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

11
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

12
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

13
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

14
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

15
A <input type="checkbox"/>
B <input type="checkbox"/>
C <input type="checkbox"/>
D <input type="checkbox"/>
E <input type="checkbox"/>

# GL West Midlands & Warwickshire Mock 1 Paper A – Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Verbal Reasoning Practice Questions

<b>A Example</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input checked="" type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input checked="" type="checkbox"/>	<b>1 Practice</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>2 Practice</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>
<b>B Example</b> A <input checked="" type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>3 Practice</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>4 Practice</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>

## Verbal Reasoning Test Questions

<b>1</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>2</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>3</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>4</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	
<b>5</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>6</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>7</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	<b>8</b> A <input type="checkbox"/> X <input type="checkbox"/> B <input type="checkbox"/> Y <input type="checkbox"/> C <input type="checkbox"/> Z <input type="checkbox"/>	
<b>9</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>10</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>11</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>12</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>13</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>
<b>14</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>15</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>	<b>16</b> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E <input type="checkbox"/>		

# GL West Midlands & Warwickshire Mock 1 Paper A – Mathematics

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Mathematics Practice Questions

A	Example	1	Practice	2	Practice
	A	A	A	A	A
	B	B	B	B	B
	C	C	C	C	C
	D	D	D	D	D
	E	E	E	E	E

## Mathematics Test Questions

<b>1</b>	A	A	<b>2</b>	A	A	<b>3</b>	A	A	<b>4</b>	A	A	<b>5</b>	A	A
	B	B		B	B		B	B		B	B		B	B
	C	C		C	C		C	C		C	C		C	C
	D	D		D	D		D	D		D	D		D	D
	E	E		E	E		E	E		E	E		E	E
<b>6</b>	A	A	<b>7</b>	A	A	<b>8</b>	A	A	<b>9</b>	A	A	<b>10</b>	A	A
	B	B		B	B		B	B		B	B		B	B
	C	C		C	C		C	C		C	C		C	C
	D	D		D	D		D	D		D	D		D	D
	E	E		E	E		E	E		E	E		E	E
<b>11</b>	A	A	<b>12</b>	A	A	<b>13</b>	A	A	<b>14</b>	A	A	<b>15</b>	A	A
	B	B		B	B		B	B		B	B		B	B
	C	C		C	C		C	C		C	C		C	C
	D	D		D	D		D	D		D	D		D	D
	E	E		E	E		E	E		E	E		E	E

# GL West Midlands & Warwickshire Mock 1 Paper A – Non-Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Non-Verbal Reasoning Subtest 1 Practice Questions

A	Example	1	Practice	2	Practice
	a	a	a	a	a
	b	b	b	b	b
	c	c	c	c	c
	d	d	d	d	d
	e	e	e	e	e

## Non-Verbal Reasoning Subtest 1 Test Questions

1		2		3		4	
	a	a	a	a	a	a	a
	b	b	b	b	b	b	b
	c	c	c	c	c	c	c
	d	d	d	d	d	d	d
	e	e	e	e	e	e	e

  

5		6		7		8	
	a	a	a	a	a	a	a
	b	b	b	b	b	b	b
	c	c	c	c	c	c	c
	d	d	d	d	d	d	d
	e	e	e	e	e	e	e

# GL West Midlands & Warwickshire Mock 1 Paper A – Non-Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Non-Verbal Reasoning Subtest 2 Practice Questions

A	Example	1	Practice	2	Practice
	a	a	a	a	a
	b	b	b	b	b
	c	c	c	c	c
	d	d	d	d	d
	e	e	e	e	e

## Non-Verbal Reasoning Subtest 2 Test Questions

1	2	3	4
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

  

5	6	7	8
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

# GL West Midlands & Warwickshire Mock 1 Paper A – Spatial Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Examples and Practice Questions

A	Example	1	Practice	2	Practice
	a	a	a	a	a
	b	b	b	b	b
	c	c	c	c	c
	d	d	d	d	d
	e	e	e	e	e

## Test Questions

1	2	3	4
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

  

5	6	7	8
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

# GL West Midlands & Warwickshire Mock 1 Paper B – English

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## English Test Questions

<b>1</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>2</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>3</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>4</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>5</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>6</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>7</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>8</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>9</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>10</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>11</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>12</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>13</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>14</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	
<b>15</b>	A <input type="checkbox"/>	
	B <input type="checkbox"/>	
	C <input type="checkbox"/>	
	D <input type="checkbox"/>	
	E <input type="checkbox"/>	

# GL West Midlands & Warwickshire Mock 1 Paper B – Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Verbal Reasoning Practice Questions

A Example	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input checked="" type="checkbox"/>
X	<input type="checkbox"/>
Y	<input checked="" type="checkbox"/>
Z	<input type="checkbox"/>

1 Practice	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

2 Practice	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

B Example	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input checked="" type="checkbox"/>
E	<input type="checkbox"/>

3 Practice	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

4 Practice	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

## Verbal Reasoning Test Questions

1	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

2	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

3	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

4	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

5	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

6	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

7	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

8	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
X	<input type="checkbox"/>
Y	<input type="checkbox"/>
Z	<input type="checkbox"/>

9	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

10	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

11	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

12	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

13	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

14	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

15	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

16	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

17	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

18	
A	<input type="checkbox"/>
B	<input type="checkbox"/>
C	<input type="checkbox"/>
D	<input type="checkbox"/>
E	<input type="checkbox"/>

# GL West Midlands & Warwickshire Mock 1 Paper B – Mathematics

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Mathematics Test Questions

<b>1</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>2</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>3</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>4</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>5</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>6</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>7</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>8</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>9</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>10</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>11</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>12</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>13</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>14</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

<b>15</b>		
	A	<input type="checkbox"/>
	B	<input type="checkbox"/>
	C	<input type="checkbox"/>
	D	<input type="checkbox"/>
	E	<input type="checkbox"/>

# GL West Midlands & Warwickshire Mock 1 Paper B – Non-Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Non-Verbal Reasoning Subtest 1 Practice Questions

A	Example	1	Practice	2	Practice
	a	a	a	a	a
	b	b	b	b	b
	c	c	c	c	c
	d	d	d	d	d
	e	e	e	e	e

## Non-Verbal Reasoning Subtest 1 Test Questions

1		2		3		4	
	a	a	a	a	a	a	a
	b	b	b	b	b	b	b
	c	c	c	c	c	c	c
	d	d	d	d	d	d	d
	e	e	e	e	e	e	e

  

5		6		7		8	
	a	a	a	a	a	a	a
	b	b	b	b	b	b	b
	c	c	c	c	c	c	c
	d	d	d	d	d	d	d
	e	e	e	e	e	e	e

# GL West Midlands & Warwickshire Mock 1 Paper B – Non-Verbal Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Non-Verbal Reasoning Subtest 2 Practice Questions

A	Example	1	Practice	2	Practice
	a	a	a	a	a
	b	b	b	b	b
	c	c	c	c	c
	d	d	d	d	d
	e	e	e	e	e

## Non-Verbal Reasoning Subtest 2 Test Questions

1	2	3	4
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

  

5	6	7	8
a	a	a	a
b	b	b	b
c	c	c	c
d	d	d	d
e	e	e	e

# GL West Midlands & Warwickshire Mock 1 Paper B – Spatial Reasoning

Please mark the boxes with a thin horizontal line like this . Rub out mistakes thoroughly.

## Spatial Reasoning Practice Questions

A	Example	1	Practice	2	Practice
	a <input type="checkbox"/>		a <input type="checkbox"/>		a <input type="checkbox"/>
	b <input checked="" type="checkbox"/>		b <input type="checkbox"/>		b <input type="checkbox"/>
	c <input type="checkbox"/>		c <input type="checkbox"/>		c <input type="checkbox"/>
	d <input type="checkbox"/>		d <input type="checkbox"/>		d <input type="checkbox"/>
	e <input type="checkbox"/>		e <input type="checkbox"/>		e <input type="checkbox"/>

## Spatial Reasoning Test Questions

1	2	3	4
a <input type="checkbox"/>	a <input type="checkbox"/>	a <input type="checkbox"/>	a <input type="checkbox"/>
b <input type="checkbox"/>	b <input type="checkbox"/>	b <input type="checkbox"/>	b <input type="checkbox"/>
c <input type="checkbox"/>	c <input type="checkbox"/>	c <input type="checkbox"/>	c <input type="checkbox"/>
d <input type="checkbox"/>	d <input type="checkbox"/>	d <input type="checkbox"/>	d <input type="checkbox"/>
e <input type="checkbox"/>	e <input type="checkbox"/>	e <input type="checkbox"/>	e <input type="checkbox"/>

  

5	6	7	8
a <input type="checkbox"/>	a <input type="checkbox"/>	a <input type="checkbox"/>	a <input type="checkbox"/>
b <input type="checkbox"/>	b <input type="checkbox"/>	b <input type="checkbox"/>	b <input type="checkbox"/>
c <input type="checkbox"/>	c <input type="checkbox"/>	c <input type="checkbox"/>	c <input type="checkbox"/>
d <input type="checkbox"/>	d <input type="checkbox"/>	d <input type="checkbox"/>	d <input type="checkbox"/>
e <input type="checkbox"/>	e <input type="checkbox"/>	e <input type="checkbox"/>	e <input type="checkbox"/>



