	FOR OFFICIAL USE		
	National Qualifications		Mark
X849/75/01			odern Studies nswer booklet
			* X 8 4 9 7 5 0 1 *
Fill in these boxes and rea	d what is printed below.		
Full name of centre		Town	
Forename(s)	Surname		Number of seat
Date of birth Day Month	Year Scottish	candidate number	

Write your answers clearly in this answer booklet. You must clearly identify in the margin the question number you are attempting.

Use **blue** or **black** ink.

Before leaving the examination room you must give this booklet to the Invigilator; if you do not, you may lose all the marks for this paper.





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Question	Marks	

